

# NEUROLOGY CLERKSHIP

Director: Brad Cole, MD ([bcole@llu.edu](mailto:bcole@llu.edu))

Coordinator: Monika Johnson, 4-4907

Office: Coleman Pavilion 11108

Phone: 558-4907 (44907)

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## EDUCATIONAL GOAL AND OBJECTIVES

### 1. Clinical Skills

Develop sufficient clinical and basic science knowledge of the pathophysiology, clinical course, and management of patients with common neurologic conditions. This includes both in-patient and out-patient settings;

Identify and accurately describe the significance of key findings on the neurologic examination;

Analyze which laboratory tests, radiographic (CT and MRI) and neurodiagnostic procedures (electroencephalography and electromyography) are indicated for diagnosing common neurological problems and how the appropriate and inappropriate use of these tests impact the quality and cost of medical care;

Distinguish normal and abnormal CT and MRI scans of the brain;

Distinguish normal and abnormal cerebrospinal fluid (CSF) findings;

Demonstrate the ability to obtain an accurate and comprehensive patient-centered neurology history from patients and their families that contains all aspects of the history, including issues related to age, gender, cultural and social setting, emotional concerns and spirituality;

Perform an organized, accurate and thorough neurologic examination in both the in-patient and out-patient setting. This includes an appropriate screening neurologic examination in cases of neurologic emergency;

Demonstrate the ability to retrieve, filter, analyze, manage, utilize diagnostic information and other patient specific information to solve problems and make patient-care decisions;

Communicate effectively about neurologic patients in order to concisely summarize a case to a colleague

Apply the scientific method in establishing the causation of disease and efficacy of traditional and non-traditional (alternative) therapies;

Create a thorough and accurate written evaluation of a patient with neurologic disease that includes a history, physical examination, laboratory, impression and plan;

Present a thorough and accurate oral evaluation of a patient with neurologic disease that includes a history, physical examination, laboratories, impression and plan;

## **2. Whole Person Care**

Students will be able to integrate basic science knowledge, clinical skills, values and professional behaviors within the context of providing whole person care for patients;

Demonstrate ability to integrate psycho-social and spiritual care with the physical care of patients;

## **3. Interpersonal and Communication Skills**

Students will develop effective interpersonal and communication skills, including sensitivity to those from diverse backgrounds (e.g., cultural, ethnicity, gender, generational, socioeconomic and religious);

Demonstrate oral, written and technological communication skills necessary for effective interactions with peers, faculty, patients and their families and other health care providers;

Demonstrate the ability to incorporate cultural and religious beliefs and practices when addressing medical problems, concerns and anxieties of patients from diverse cultures and socioeconomic backgrounds, including differing approaches to health, wellness and human suffering;

Demonstrate willingness to serve as a member of the health care team and effectively use the contribution that each member of the team can make to a patient's recovery;

Respect differing values, cultures and beliefs, including diversity in sexual orientation, gender, age, race, ethnicity and spirituality of patients, peers, faculty and other health care providers;

## **4. Medical Professionalism**

Students will develop professionalism in excellence and scholarship, accountability and responsibility and altruistic behaviors;

Demonstrate accountability and responsibility by acknowledging one's limits in knowledge or ability, demonstrating initiative for own learning and responding to feedback appropriately;

## **ASSESSMENT**

Observed neurologic examination

Verbal presentation of patients

Attendance at lecture and rotation sites

Preceptor Progress Report

NBME subject examination

## REQUIREMENTS

- 1) You are required to have the following with you throughout the 4 week rotation:
  - a) Reflex hammer
  - b) Tuning fork
  - c) Safety/disposable pins
  - d) Pocket Snellen eye chart
  - e) ophthalmoscope
- 2) Supervised neurologic examination (best done during inpatient rotation, turn in to Coordinator)
- 3) Oral presentations of patients as required by rounds and clinic
- 4) Perform supervised lumbar puncture, if patient available
- 5) Attendance:
  - a) Orientation, first Monday, Centennial Complex, Rm. 2226
  - b) Assigned clinics and hospitals
  - c) Thursday Lectures - see Lecture Schedule for dates
  - d) Journal Club - you must read the article ahead of time and be prepared to contribute to discussion. (bring your red book to get signed off for Journal Club)
  - e) Neurology Grand Rounds, Wednesday 8-9 am, Children's Hospital Rm 1830 (regardless of what subspecialty you are rotating with at the time.
- 6) Evaluations:
  - a) Mid-Rotation Progress Report is to be filled out by either an attending or neurology resident after your first week of inpatient service, regardless if this is at Week 1 or Week 3. (on One45)
  - b) The Preceptor Final Evaluation is to be filled out by an attending or neurology resident after your second week of inpatient service. (on One45)
  - c) Dr. Cole will complete the Clerkship Director Final Evaluation of Student.
  - d) No evaluations are required during Outpatient Rotation.
- 7) Physical Medicine and Rehabilitation exposure & sign-off
- 8) EEG and EMG exposure
- 9) Completion of OSCE – **Students rotating at Kettering must return on the weekend after completing 3 full weeks. Students rotating at WMH must return on Tuesday of the 4<sup>th</sup> week of rotation.**
- 10) Completion of all One45 evaluation.

Students will generally spend two weeks with an acute care neurology service inpatient facility and two weeks in an outpatient neurology clinic. Each site and personnel are reviewed by this program and given a copy of course objectives and requirements.

## GRADES

Clinical skills (Evaluations via supervisor)	40%
OSCE	20%
NBME Subject Examination	40%
Attendance	Required

## PASS

Satisfactory clinical skills evaluation  
Lecture attendance  
Pass final examination – Minimum Score – 65

## FAIL

Not completing requirements above  
Clinical skills evaluation unsatisfactory  
Fail to attend lectures  
Fail final examination

Note: Students who fail the OSCE examination will receive remediation through Dr. Shankel's office in the School of Medicine.

## **HONORS**

Students with an overall grade of 88% or higher will receive honors. This is based on the overall evaluation that incorporates clinical skills, subject examination, OSCE performance and professionalism. In previous years, approximately 16% of students achieved an overall percentage of 88 or higher. Students that receive an overall grade of 82% or higher will receive a high pass.

## **IN PROGRESS**

Not completing requirements above

Fail to pass final examination or Clinical skills evaluation with unsatisfactory comments

## **RESOURCES**

[www.Neurologystudent.com](http://www.Neurologystudent.com) is a website that was developed specifically for this clerkship. You should go to the website and click “login”. Then click “New Account” and follow the instructions. The course materials from the first and second year neuroscience course area also available as a resource. If you want to access these, use the same passcode (“key”) as you did for the 3<sup>rd</sup> year clerkship. I would recommend that you take the pretest at the beginning of the rotation and then follow the on-line course outline beginning with neurology localization and so on. You will need to install the adobe flash player to watch the videos. There are many recorded lectures, handouts, and patient video clips that are included. I would strongly encourage you to utilize this resource in preparation for the subject examination.

Recommended textbooks:

Clinical Neurology, 6<sup>th</sup> edition. Lange Series, Aminoff, Greenberg, Simon.

Adams and Victor’s Principles of Neurology, 8<sup>th</sup> edition.

Neurological Examination Made Easy, G. Fuller, is a great physical exam book.

Didactics cannot cover all areas and we can provide the fundamentals and concepts of neurology, but you must study to enhance your learning.

## **QUESTIONS THAT FREQUENTLY COME UP**

- a) Days off are not allowed. There are only extreme/rare situations where exceptions are made (death of a family member, etc.). Please do not request days off to attend a family member’s birthday party, anniversary, etc. Absences are approved by the Clerkship Coordinator or Clerkship Director only and must be approved prior to being taken.
- b) Time off before the final exam. The Neurology Clerkship does not grant time off before the exam to study. You are expected to be at your assigned rotation location Monday through Thursday the week of the exam
- c) Sick: You must contact Monika in the Neurology office at 558-4907 and leave a message for each day you are sick or you will be absent without permission. Two or more days sick require a visit to student health and a note from the doctor.
- d) Missing more than 1 week of the rotation for any reason will require the rotation be repeated as per SOM policy
- e) School of Medicine policy states that you are not allowed to complete work for other rotations during the rotation that you are on.

## **STUDENT WORK HOUR GUIDELINES AND CALL**

The medical needs of patients and the professional responsibilities of student physicians cannot begin or end at arbitrarily defined hours. Having said that, here are some general guidelines about work hours:

- a) The maximum workweek is 80 hours/week averaged over the four-week rotation with in-house call duty scheduled no more frequently than every third night. These hours include time required to care for patients, and time to participate in the organized teaching activities. Study time outside the hospital is not included in this.
- b) Students will not be on call after midnight the night before the National Board Subject Examination.
- c) Students on the ward services at LLUMC and at the VA are expected to take one weekend overnight call and then to participate in morning rounds. This is to be done while staying within the listed work hours guidelines. The specifics of this call schedule should be worked out with the neurology resident on service. This is home call and you are not required to stay in the hospital overnight.
- d) A maximum of 24 hours of continuous duty in the hospital is permitted. No additional clinical responsibilities can be assigned after 24 hours of continuous in-house duty.
- e) Work with your senior resident for weekend assignments, when on the inpatient service. Students are required to be present each weekday until dismissed by the senior resident or attending.
- f) Clinical duties end with the final test unless needing to complete missed time or responsibilities.

## **PROFESSIONALISM**

Patients view you as a physician; you are learning not only medical information, but how to treat people. You are expected to be prompt, dress and act professionally. This also includes no ringing cell phones or answering phones during patient care, and no talking during patient presentations. Be cautious about how you talk to patients; think about how you would want to be cared for or how others care for your family. Effective communication is vital to patient care. Be active, ask questions, take initiative and expect teaching in return.

## **CLINIC**

When assigned to Loma Linda adult neurology clinics, you do not have a particular attending assignment. Mary Jewell is your contact person at the FMO clinic, but if she is not available ask any resident, attending, or medical assistant to help you find out which attending/resident/NP are in clinic that day, or maybe which subspecialty clinic you are interested in being involved with. Initiative will greatly enhance your learning experience.

## **PM&R**

The SOM requires PMR exposure during medical school and that has been assigned via the neurology rotation. The Neurology Rotation Schedule shows the days assigned to do clinical work with the PM&R department. You are also required to attend PMR didactics; do this on the Wednesday of the week you are assigned clinical work, even if the clinical assignment is not on Wednesday. Location and time is listed on Rotation Location List (below).

## **CLINICAL NEUROPHYSIOLOGY**

Exposure to EEG and EMG occurs during a day of outpatient neurology clinic. For EEG, you will go to the EEG lab (MC-Lobby Level, next to the GI Lab) technician workroom and inquire on when the next EEG is scheduled for you to observe.

To observe an EMG, call the EMG technicians (Liz 2-4104, Lydia 2-4103) to inquire on the times of EMGs scheduled for that day to observe. This will be more meaningful if you first read about EEG and EMG. EEG and EMG introduction discussions are in the Lange Clinical Neurology and UpToDate or Emedicine.

During your PM&R and Clinical Neurophysiology days you are excused from clinic assignments and it is advised to use your free time to study.

On EEG/EMG days: each student needs to observe at least one EMG and EEG and read about that testing. It will be far more educational, if you read initially and then observe the study. Have the technician or physician sign your sheet that you were present. For EEG you can present to the EEG technician room and ask when the next study will be done and EMG's are scheduled, so inquire there as well to see when the next is and which residents/attendings are involved.

EEG  
LLUMC Lobby level, Room 1432  
(next to the GI lab)

EMG  
FMO, B-100  
Ext 2-4104 or 2-4103

### **ADDITIONAL EDUCATIONAL ITEMS:**

Up To Date introductory discussion:

From VIP page click on Reference then LLU Library Databases

Click on UpToDate Online and search for clinical neurophysiology and read the information

OR

Emedicine introductory discussions: [www.emedicine.com](http://www.emedicine.com)

Under Neurology: Electromyography and Nerve Conduction Studies

1. EMG evaluation of the motor unit

### **Package should include:**

1. Neurology Rotation Schedule
2. Objectives, grading
3. Rotation locations
4. Neurologic Examination Grading Sheet
5. Predetermined Patient List
6. Lecture schedule
7. Journal Club Article
8. Additional information for outside rotations

## Rotation Location List

**Orientation – date and times are listed on your lecture schedule. Lectures take place in the Neurology Conference Room, CP-11110 unless otherwise noted. Please consult your lecture schedule to avoid the wrong date and time!**

<b>LLU Ward 8am – meet for morning report in CP-11110</b>			<b>FMO Clinic</b> - Faculty Medical Offices - Ste B-100, contact Mary Jewel, @ 558-2833/ext 22833 to get assigned to an attending.		
Mon	8:00am	Rounds, Unit 6200 Conference Room	Mon	8:00am	Student/Resident Clinic
Tue	8:00am	Rounds	Tue	8:00am	Clinic
Wed	8:00am 9:00am	Grand Rounds, CH Rm 1830 Rounds	Wed	8:00am 9:00am	Grand Rounds, CH Rm 1830; Clinic
Thurs	8:00am	Rounds PM lectures, if scheduled.	Thur	8:00 am	Clinic PM lectures, if scheduled.
Fri	8:00am	Rounds	Fri	8:00am	Clinic – till close
Sat & Sun		as assigned by senior resident	Sat & Sun	N/A	N/A
<b>VA Ward</b> On first day call the resident: Dr. Dastjerdi/9376 or mdastjerdy@my2way.com			<b>VA Clinic</b>		
Mon	9:00am	Rounds, 2SW Neurology Conference Room	Mon	9:00am 1:00pm	Dr. Patel (3NE), or Dr. Cole 2SW (Rm 2A-47) Dr. Cole 2 SW (Rm 2A-47)
Tue	9:00am.	Rounds	Tue	9:00am 1:00pm	Drs. D Cole or Patel 3 NE Neurology Clinic Dr. D. Cole 3NE
Wed	8:00am 9:30am	Grand Rounds, CH Rm 1830 Rounds	Wed	8:00am 9:30am 1:30pm	Grand Rounds, CH Rm1830 Dr. Cole (2SW, Rm 2A-47) sometimes Patel, Rm 3NE Residents Clinic
Thurs	9:00am	Rounds PM lectures, if scheduled	Thurs	8:00am 1:00pm	Dr. Byun (3NE) PM lectures
Fri	9:00am	Rounds	Fri	8:30am	Dr. D Cole, 3 NE or 2SW, (Rm 2A-47)
Sat & Sun		as assigned by senior resident	Sat & Sun	N/A	N/A
<b>Peds Inpatient</b> Please email Dr. Stan Shu the week before beginning the rotation at <a href="mailto:sshu@llu.edu">sshu@llu.edu</a> . Contact Ann Elliott, ext. 4-2212			<b>Peds Neurology Clinic</b> Please email Dr. Stan Shu the week before beginning the rotation at <a href="mailto:sshu@llu.edu">sshu@llu.edu</a> . Pediatric Neuroscience Clinic Offices, Location: 2195 Club Center Dr (off Caroline St) San Bernardino		
Mon	8:00am 9:00am	morning report. rounds.	Mon	8:30am	Clinic
Tue	8:00am 9:00am	morning report. rounds	Tues	8:30am	Clinic
Wed	8:00am 9:00am	Grand Rounds, CH Rm 1830 Rounds	Wed	8:00am 9:00am	Grand Rounds, CH Rm 1830 Clinic
Thurs	8:00am 9:00am	morning report rounds. PM lectures, if	Thurs	8:30am	Clinic, PM lectures, if scheduled.
Fri	8:00am 9:00am	morning report. rounds	Fri	8:00am 9:00am	Peds Grand Rounds, 1 <sup>st</sup> , 3 <sup>rd</sup> & 4 <sup>th</sup> Fri of month , Children Hosp. Conf.. Rm. 1830/1832 Clinic 4285
Sat & Sun	N/A	as assigned by PedsNeuro resident	Sat & Sun	N/A	N/A

<u>Neurosurgery Inpatient</u>			<u>Neurosurgery Clinic</u>		
Mon	7:00am	Meet Dr Asgarzadie at E.C.S.H Lobby fazgarzadie@my2way.com	Monday	8:30am	Prof Plaza, A108Zouros/Sadanand all day.
Tue	5:30am	Resident Library MC 2574	Tue	8:30am	Prof Plaza, A108 Hsu every Tues all day; Asgarzadie every other Tues am,
Wed	5:30am 8:00am 9:00am	Resident Library MC 2574 Grand Rounds, CH Rm 1830 Neurosurgery Didactic Conf)	Wed.	8:00am 9:00am 3:00pm 10:00-4:00	Grand Rounds, CH Rm 1830 Neurosurgery Didactic Conf, Faculty Topic Review Rm 2587 Pro Plaza A-108 Colohan
Thur	5:30am	Resident Library MC 2574 – Check schedule with chief resident. PM lectures, if scheduled.	Thur		Operating Room – Check schedule with chief resident PM lectures, if scheduled
Fri	5:30am	Resident Library MC 2574	Fri	8:30 am	Prof Plaza, A108, Hsu Sadand (Ped Neurosurgery)
Sat & Sun –		as assigned by Neurosurg. Resident	Sat & Sun	N/A	N/A

### Beaver Clinic

Please see “Beaver Rotation Information Letter”

If you have any questions, please call contact person listed in letter.

Preceptors: Dr. Robert Klein & Dr. Yujian Guo.

7000 Boulder Ave, Highland.

**It is imperative that you complete all application requirements prior to starting your rotation.**

### Kaiser

Please see “Kaiser Rotation Information Letter”

If you have any questions, please call contact person listed the letter.

Preceptors: Dr. I. Isaac (Rm 4H) or Dr. S. Higuchi (Rm 4F)

10800 Magnolia Ave. Riverside, CA 92505, Medical Office Bldg

**It is imperative that you complete all application requirements prior to starting your rotation.**

Mon	8:00am	Clinic	Mon	8:00am	Clinic - Dr. Higuchi
Tue	8:00am	Clinic.	Tue	8:00am	Dr. Higuchi & Dr. Isaac Clinic – 1 student each
Wed	8:00am 9:30am	Grand Rounds, CH Rm 1830 Clinic	Wed	8:00am 9:30am	Grand Rounds, CH Rm 1830 Dr. Higuchi & Dr. Isaac Clinic – 1 student each
Thurs	8:00am	Clinic. PM lectures, if scheduled.	Thur	8:00am	Dr. Higuchi & Dr. Isaac Clinic – 1 student each PM lectures, if scheduled
Fri	8:00am	Clinic.	Fri	8:00am	Dr. Higuchi & Dr. Isaac Clinic – 1 student each
Sat&Sun			Sat&Sun	N/A	N/A

### PM&R

Please page the doctor you are assigned to 1 day prior to starting your PM&R rotation to find out where and when to meet. See the rotation schedule for the name & pager # for the doctor you are assigned to.

**Monday 7:00am:** Lecture Series, Journal Club, Bladder Rounds – Outpatient Rehab Center, Rm. 129.

Not scheduled for all Mondays - check with the resident you have been assigned to.

**Wednesdays 12-2pm:** Didactic lecture – Outpatient Rehab Center, Rm. 129. You must attend this lecture during the week you are scheduled for PM&R, regardless of the day of the week you rotated with PM&R (i.e. If you are scheduled for Monday and Tuesday, you still have to attend lecture on Wednesday.) For questions, please contact JJ Macias at ext. 66202.



**White Memorial Hospital**

If you have requested to rotate at WMH, please be sure to contact Patricia Sandoval, Student Coordinator at WMH, to complete any requirements they may have. You are required to complete the Neurologic Evaluation Grading Sheet and the Patient List.

Neurology Lectures on Thursdays: you are expected to attend via videoconferencing

Patricia Sandoval  
Medical Student Coordinator/MITHS Assistant  
**Loma Linda University School of Medicine Deans Office**  
White Memorial Medical Center  
Medical Education Department  
1720 Cesar E. Chavez Avenue  
Los Angeles, CA 90033  
[sandovP1@ah.org](mailto:sandovP1@ah.org)  
Office: 323-881-8840  
Fax: 323-881-8601

**Kettering**

If you have requested to rotate at Kettering, please be sure to contact Julie Dicken, Student Coordinator at Kettering, to complete any requirements they may have. You are required to complete the Neurologic Evaluation Grading Sheet and the Patient List.

Neurology Lectures on Thursdays: you are expected to attend via videoconferencing

Julie Dicken  
Kettering Medical Center  
Residency Coordinator  
Internal Medicine/Transitional Year  
Residency Programs  
[Julie.dicken@khnetwork.org](mailto:Julie.dicken@khnetwork.org)  
P: 937-395-8063  
F: 937-395-8399

**Riverside County Regional Medical Center**

Please see attachment – Students scheduled for RCRMC

8:00am	Clinic/Consults
8:00am	Clinic/Consults
8:00am	Grand Rounds, CH Rm 1830
9:00am	Clinic/Consults
8:00am	Clinic/Rounds
8:00am	Clinic Rounds

**Night Call 6pm – 9am**

Please contact the Night Float Resident. The pass-around pager # is 6190. Page resident on Night Float at 6pm for each day that you are on call. Introduce yourself, provide your contact information to the neurology resident, and find out where to meet.

You are on call Monday starting at 6pm until 9am and will maintain this same schedule every day until Thursday 6pm – Friday 9am shift. You do not need to do any other night call. You have no other duties during this week and are not required to attend lectures or conferences. If you have a light call you are encouraged to attend the lectures."

## Complete Neurologic exam

### Mental status

Level of alertness

Orientation

Visuospatial

Formal testing in appropriate setting

### Language

Spontaneous speech/fluency

Naming

Repetition

Comprehension

### Cranial nerves

CN2 Funduscopic exam

CN2/3 Pupillary light reflex

CN2 Visual fields

CN 3/4/6 Eye movements

CN5 Facial sensation

CN7 Facial strength-close eyes, smile

CN8 Hearing

CN9 Palatal movement/speech

CN10 swallow

CN11 Neck strength/shoulder shrug

CN12 Tongue movement

### Motor

Bulk

Tone-resistance to passive movement

Power

Pronator drift-arms outstretched in front of patient in supination and have patient

close eyes, observe for pronation or drift of arm down

### Sensory

Light touch

Pain (pinprick)-single use safety pin or broken and pointy cotton swab stick

Temperature-tuning fork is usually cold

Vibration-tuning fork on toe

Proprioception-at big toe

### Reflexes

Biceps C5/6

Triceps C6/7/8

Brachioradialis C5/6

Patellar L2/3/4

Achilles S1

Plantar responses-upgoing toe=Babinski or downgoing

### Coordination

Finger to nose

Heel to shin

Rapid alternating movements-tap foot quickly, tap finger or hand quickly, touch each finger in turn to thumb

### Gait

Straightaway-observe for stride length, base

Toe

Heel

Tandem

Movement	Muscle	Nerve	roots
arm abduction	deltoid	axillary	C5/6
elbow flexion	biceps	musculocutaneous	C5/6
elbow extension	triceps	radial	C6/7/8
wrist extension	extensor carpi radialis; extensor carpi ulnaris	radial	C6/7;C7/8
wrist flexion	flexor carpi radialis; flexor carpi ulnaris	Radial; ulnar	C6/7; C8/T1
finger extension	extensor digitorum communis	radial	C7/8
finger flexion	flexor digitorum profundus median; flexor digitorum profundus ulnar	Median; ulnar	C7/8; C8/T1
finger abduction	Interossei	Ulnar	C8T1
hip flexion	Psoas	Femoral	L2/3/4
Knee extension	Quadriceps	Femoral	L2/3/4
Knee flexion	Semitendinosis; semimembranosis	Sciatic	L4/5/S1/2
Dorsiflexion	Tibialis anterior	Peroneal	L4/5
Plantarflexion	Gastrocnemius; soleus	Tibial	L5/S1/2

## **Screening neurologic exam**

To detect significant neurologic disease in setting of no symptoms

### Mental status

Level of alertness

Appropriate response to questions

### Cranial nerves

Pupillary light reflex

Eye movements

Facial strength

### Motor

Strength—arm abduction, elbow extension, finger abduction, hip flexion, knee flexion, dorsiflexion

### Sensory

Light touch or pain at toes

### Reflexes

Biceps

Patellar

Achilles

Plantar responses

### Coordination

Finger to nose

### Gait

Straightaway

## **Exam in setting of altered level of consciousness**

### Mental status

Level of arousal

Response to auditory stimuli

Response to visual stimuli

Response to pain—central and to limbs

### Motor

Spontaneous movements

Movement to pain

Voluntary movement

Tone

### Cranial nerves

Pupillary light reflex

Oculocephalic reflex

Vestibulo-ocular reflex

Corneal reflex

Gag reflex

### Sensory

Pain applied and observe for response

### Reflexes

Tendon reflexes

Plantar responses

## Neurologic Examination Grading Sheet

Have a resident or attending observe you complete a neurologic examination and then have them complete this form.

Student Name: \_\_\_\_\_

Exam	Check if done	Comments
Mental Status (at least 2 items)		
Language - name, repeat, follow commands		
Cranial Nerves		
Motor Strength, bulk, tone, pronator drift		
Sensory Light touch, pin prick, temp, vibration, proprioception		
DTR Babinski		
Cerebellar		
Gait		
<b>Portion done particularly well</b>		
<b>Area that needs improvement</b>		
Resident/Attending		<hr style="border: none; border-top: 1px solid black;"/> Signature

Call completed:

Weekend call, signature of resident worked with \_\_\_\_\_

Weekday call, signature of resident worked with \_\_\_\_\_

EEG observed \_\_\_\_\_

EMG observed \_\_\_\_\_

PM&R \_\_\_\_\_

PM&R \_\_\_\_\_

When completed, please send this form to Monika Johnson, Neurology, CP-11108

Department use:  OSCE ____ Attendance ____ Examination ____ Clinical skills ____
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## Neurology Predetermined Patient List

All of the symptoms or conditions listed below may be seen either during the inpatient (IP) or outpatient (OP) setting. The level of student involvement for this list will include either direct responsibility or observation of a patient who is followed by another student/resident or neurologist. Please initial in the boxes below.

Students will see patients that have the following symptoms (may be part of a diagnosis listed below):

	IP	OP	Direct patient responsibility	Observation
Weakness				
Numbness				
Dysarthria				
Headache				
Dizziness				

Students will see patients who have the following conditions:

1. Cerebrovascular disease:

	IP	OP	Direct patient responsibility	Observation
Stroke				
TIA				
Intracranial hemorrhage				

2. Degenerative disorder:

	IP	OP	Direct patient responsibility	Observation
Dementia				
Multiple sclerosis				
Brain tumor/mass				

3. Pain presentation:

	IP	OP	Direct patient responsibility	Observation
Headache				
Arm pain				
Leg pain				
Neck pain				
Back pain				

4. Movement disorder:

	IP	OP	Direct patient responsibility	Observation
Parkinson's disease				
Tremor				

5. Peripheral nervous system disease:

	IP	OP	Direct patient responsibility	Observation
Polyneuropathy				
Carpal tunnel syndrome				
Ulnar neuropathy				
Radiculopathy				

6. Episodic disorder:

	IP	OP	Direct patient responsibility	Observation
Seizure				
Migraine headache				
Syncope				

7. Altered level of consciousness:

	IP	OP	Direct patient responsibility	Observation
Coma or encephalopathy				

Please turn this form in to Dr. Bradley Cole the day of the Exam Prep!