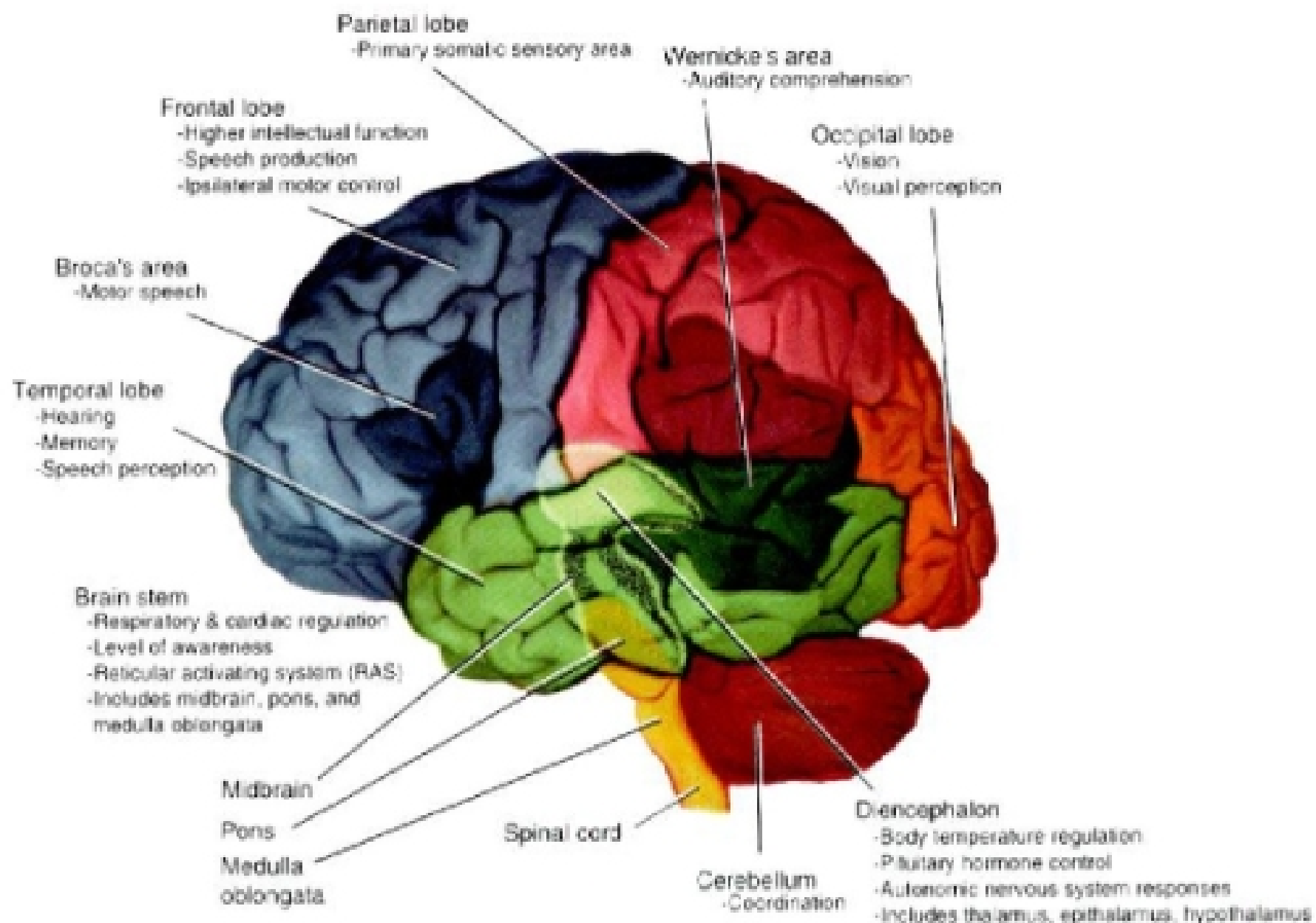


04/22/13

- Assessment of the Neurological System
 - o Central Nervous System
 - Purpose: assess functions of neurological system



- o Peripheral Nervous system
 - Somatic Nervous System
 - Autonomic Nervous System
 - Sympathetic –“fight or flight”
 - Parasympathetic
 - Cranial Nerves
 - I – XII
 - Named how they come out of the brain and go back as they move out from under the brain.
 - Spinal Nerves
 - 31 Pairs
 - 8 cervical spine; 12 thoracic; 12 lumbar; 5 sacral; spinal nerve
 - Spinal cord: Mediates the reflexes
 - Brain is NOT involved in reflexes
 - Dermatomes
 - T-4: nipple line
 - T-10: umbilicus line
 - L spinal nerve does right side
 - R spinal nerves does Left side

CLIENT REPORTS PROBLEM WITH SPEAKING WORDS. PROBLEM IS IN?

FRONTAL LOBE

CLIENT HAS PROBLEM WITH BALANCE. PROBLEM IS IN?
CEREBELLUM

- History
 - Assess changes in the Neurological System
 - Concerning Symptoms
 - Brain attacks
 - Bates p. 659
 - Mostly sudden onset of numbness, weakness, understanding language, trouble seeing or double vision, trouble with walking, dizziness, severe headache with no cause
 - Patient has max 3 hours to fix clogged artery, blood clot, or aneurism
 - Other system symptoms
 - Change in senses or loss in sensation
 - Tingling, numbness, memory loss, droopy face, seizures, involuntary movements
 - Past History
 - Concussions
 - Sequillia
 - Any sustained impacts prior to their injury?
 - Mini Strokes: TIA → transient ischemic attack
 - Minor paralysis for a period of time
 - Usually around the mouth
 - Temporary interruption of the brain.
 - More likely to have a full CBA, higher risk
 - Peripheral Artery Disease
 - Could have plaque buildup including the ones in the brain.
 - Coronary Artery Disease
 - Aneurysms
 - Blowing aneurysms
 - Can blow due to high blood pressure
 - Diabetes
 - Meningitis
 - Family History
 - History of Neuro problems
 - Hypertension
 - Coronary Artery Disease
 - Mini Stroke
 - Tumors
 - Degenerate brain disease
 - Alzheimers
 - Pips Disease
 - Mad Cow
 - Dementica
 - Parkinsons
 - Seizures

- Life System
 - Smoking
 - Sports
 - Helmet usage; injuries
 - Medications
 - General
 - Street Drugs
 - Cocaine
 - May cause strokes
 - Teenagers who do drugs, they increase their likely hood for being permanently addicted to drugs due to brain morph.
 - Strokes are not genetic, but may have same risk factors
 - Physical Examination
 - Three Types of Neuro Exams
 - Complete Neurological Assessment
 - When there is a neuro problem
 - Neurological Screening Exam
 - General Physical
 - Components of all 5 areas but does not go into much depth
 - If there is an issue causes the need for a complete assessment.
 - Neuro Check
 - For rapid repeated checks
 - E.g. Head injury
 - Complete Neurological Exam
 - Exam Components
 - Mental Status
 - Cranial Nerves
 - Motor and Cerebella Systems
 - Sensory
 - Reflexes
 - Mental Status
- 1. Appearance and behavior
 - Level of consciousness
 - Alert
 - Knows person, place, date
 - Lethargic
 - Cannot STAY awake
 - Obtunded
 - SLOW response, confused
 - Stuporous
 - Unaware to surroundings
 - Comatose
 - Does not response to anything
 - Definitions pg. 601
 - Glasgow Coma Scale (Pg. 653)
 - Hospital assessment tool