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Basic Neurological Exam; Chapter 1: History Taking; Essential Elements of Taking a Good History: Listen; Formatting the History of Present Illness; Value of a Thorough Patient History; Summary; Chapter 2: Mental Status Testing; Assessment of Level of Consciousness; Assessment of Speech; Assessment of Orientation; Assessment of Memory; Assessment of Abstract Reasoning; Assessment of General Fund of Knowledge; Assessment of Calculation; Assessment of Object Recognition; Assessment of Voluntary Movement; Chapter 3: Cranial Nerves I and II; Cranial Nerve I: Olfactory Nerve; Cranial Nerve II: Optic Nerve; Chapter 4: Cranial Nerves III, IV, and VI; Cranial Nerve III: Oculomotor Nerve; Cranial Nerve IV: Trochlear Nerve; Cranial Nerve VI: Abducens Nerve; CN III, IV, and VI Nerve Palsy; Chapter 5: Cranial Nerves V, VII, and VIII; Cranial Nerve V: Trigeminal Nerve; Cranial Nerve VII: Facial Nerve; Cranial Nerve VIII: Vestibulocochlear Nerve; Chapter 6: Cranial Nerves IX, X, XI, and XII; Cranial Nerves IX and X: Glossopharyngeal and Vagus Nerves; Cranial Nerve XI: Accessory Nerve; Cranial Nerve XII: Hypoglossal Nerve; Chapter 7: Testing Motor Strength; Muscle Function; Peripheral Motor Strength; Nerve Root Evaluation; Myelopathy; Motor System Dysfunction; Chapter 8: Testing Sensation; Dermatome Sensory Patterns; Testing Light Touch; Pain (Pinprick Test); Temperature; Vibration; Proprioception; Cortical Sensation (Higher Order Sensory Testing); Chapter 9: Testing Reflexes; Deep Tendon Reflexes; Superficial Reflexes; Chapter 10: Balance and Gait; Examination of Gait; Provocative Testing of Gait; Examination of Balance; Gait as a Measure of Functional Capacity; Naming Neurologic Gaits; Note; Chapter 11: Testing Coordination; Tests Used; Testing the Patient; Interpretation of Coordination Testing; Note; Chapter 12: Imaging and EMG Studies; Plain Films; Computed Tomography Scans; Magnetic Resonance Imaging; Electromyography and Nerve Conduction Velocity Studies; Part II: Common Neurological Symptoms and Conditions Presented in Primary Care; Chapter 13: Vertigo; Clinical Approaches to Vertigo; Questions to Ask the Patient; Useful Laboratory Tests; Special Testing; Useful Imaging Studies; Treatment; Chapter 14: Tremor; Clinical Approach to Tremors; Questions to Ask the Patient; Useful Laboratory Tests; Useful Imaging Studies; Treatment; Chapter 15: Low Back Pain; Clinical Approach to Low Back Pain; Questions to Ask the Patient; Useful Laboratory Tests; Useful Imaging Studies; Treatment; Chapter 16: Peripheral Neuropathy; Clinical Approach; Questions to Ask the Patient; Important Labs; Imaging; Electromyogram Testing; Treatment; Chapter 17: Weakness; True Weakness Versus Perceived Weakness, Fatigue or Exhaustion; Clinical Approach; Questions to Ask the Patient

Sommario/riassunto

Today's APN and PA programs have been allocating less time to the study of neurology, leaving new practitioners with an uncertain grasp of how to approach the neurologic patient. Here is a "how to" manual for knowledgeably conducting the basic neurological examination and confidently applying exam findings to the interpretation of common neurologic symptoms. It explains all facets of the standard neuro exam that is conducted in a clinic or hospital setting including useful algorithms. The book then focuses on using the exam results to determine a likely diagnosis and/or area of concern for fu
