

CN (II, III, IV, VI) (Vision)

Inspect:

Examine posture and gait.

Normal Head position

No Asymmetry

Pupils are constricted and symmetrical at rest

No Ptosis

No Proptosis (From behind and above the pt)

No Periorbital swellings or redness

No conjunctival redness or edema

No lid lag/led retraction (move yr finger..)

No abnormal movements or blinking

No strabismus

No corneal ulceration

Normal lacrimal apparatus

Normal eyelid margin

Visual field:

(2 Eyes open):

2 hands movements, then:

No homonymous defect

Normal Sensory inattention

(1 eye open):

Normal peripheral visual field

Using the red-head pin: 

Normal color saturation اسأله شو لونه؟

Move the pin:

The Blind spot is at distance of:.....

Normal central visual field

H-shape by finger: مشي عيونك مع اصبعي

No blurry vision

No Double vision

No Nystagmus, smooth pursuit, no divergence of gaze.

Light reflexes:

Use torch: (3 sec at each eye)

Normal Direct and indirect eye reflexes

Normal consensual light reflex

Normal relative peripheral pupillary reflex

Accommodation (look at a far object then immediately on a near one):

CN V

Sensation:

Symmetrical bilateral intact fine touch and superficial pain

Motor:

Inspect

Insure no pain

Palpation: clench pt's teeth.

No muscle wasting (esp temporalis muscle).

No abn movement

No hypertrophy

Normal muscle tone

Power: jaw against resistance:

No weakness or jaw deviation

Jaw reflex: absent jaw reflex

I have to examine

Corneal reflex

Nasal tickle

Ant 2/3 sensation of tongue

CN VII

Inspect:

Symmetrical face

Symmetrical bilateral blinking

Normal nasolabial folds

No mouth angle deviation

No ptosis

No abnormal muscle movements

Normal wrinkling

Intact orbicularis oculi (screw)

Intact orbicularis oris (2) smile

(No mouth angle deviation)

Intact buccinator with no air escape (smile and blow)

Whistle (ask pt to purse lips)

Intact platysmas (cringe)

We have to examine

Ant 2/3 taste of tongue

Hyperacusis of stapedius muscle

Corneal reflex

Schirmer's tear test

Normal accommodation reflex with convergence.

I have to do:

Fundal examination
Macular test (Amsler grid)
Visual Acuity (Snellen chart)
Ishihara test (for colour blindness)

CN VIII

Hearing part (cochlear branch):

Whispering: 15 then 60 cm for both ears,
rub the other ear:
Intact hearing bilaterally

Tuning fork:

First on sternum

Then Weber's Test؟ وين سامع الصوت؟

Then Rinne test: بس تبطل تسمع عالعظمة احكي لي
بعدين بنحطها قدام الاذن

+ve Rinne test

+ve = normal)

Vestibular branch:

1- Dix-Hallpike maneuver

2- Vestibular reflex that includes
caloric reflex and oculocephalic reflex

CN IX & X

Speech: احكي مع المريض: ..

No dysarthria no dysphonia

Say AAh (**use torch**):

soft palate moves upwards and Uvula is centrally located

Cough:

Normal cough strength & sound

No bovine cough

Puff out: انفخ خدودك

No nasal air escape

I have to examine:

Gag reflex by water swallow test

Posterior 1/3 sensation of tongue

XI (or accessory muscles)

Inspect:

SCM من قدام & trapezius من ورا

No muscle wasting

No hypertrophy

No abnormal movements

No scars

No asymmetry of shoulder contour

No deformity

Palpate both:

No tenderness, normal muscle bulk (or no hyper/hypotrophy)

Power:

خلي المريض يحركهم لحاله بالبداية:

SCM: يمين يسار تحت

Trapezius: ارفع ونزل اكتافك

Then Against resistance:

Symmetrical bilateral intact SCM and trapezius

And normal power

CN XII

Inspect tongue:

No muscle wasting

No fasciculation

No abnormal movements

No hyper/hypotrophy

No deviation: خليه يمد لسانه

Press tongue against cheek with resistance

خليه يسكر تمه ويدفع خدوده بلسانه

Move tongue quickly:

Intact tongue muscles

Say lalala:

Normal lingual sounds

I have to do swallow test

Good luck!
- Ola Alahdab