

The normal neurological status

No external signs of head injury can be observed. There is no nuchal rigidity. Brudzinski and Kernig signs are negative. No other signs of meningeal irritation can be observed.

Cranial nerves

I. All tested odors are sensed equally and named correctly in both nostrils. The patient does not report any pathological sensation of smell.

II. Intact visual acuity bilaterally. The confrontation test does not reveal any defect in the visual fields. On the optic fundi the disc edges are sharply defined. The color of the disc is pink and the size and regularity of the retinal vessels are normal. Spontaneous venous pulsation can be observed. No abnormal retinal pigmentation.

III.-IV.-VI. The pupils are round, equal in size, and 3-4 mm in diameter. The pupils react equally to light both directly and consensually. The pupils react to accommodation and convergence equally bilaterally. There is no lid retraction, lag, or ptosis. Extraocular movements are intact in all directions of gaze. Nystagmus cannot be observed. Does not report diplopia.

V. The bulk, tone and strength of the masticatory muscles are normal, and equal on the two sides. With the mouth open the mandible does not deviate. The sensation of touch, pin prick, cold and heat is intact and equal on the face in all three divisions of the trigeminal nerve. Recognizes the numerals written on the skin of the face in all three divisions of the nerve. The exit points of the supraorbital, maxillary and mental nerves are not sensitive to pressure. Brisk corneal reflex can be elicited on both sides.

VII. The face is symmetrical at rest. Smiling, shutting eyes and frowning are performed symmetrically and with equal strength on both sides. Taste sensation is intact on the anterior two-thirds of the tongue. Brisk corneal reflex can be elicited on both sides.

VIII. Hears whispered voice at fifteen feet (five meters) in each ear. Weber: sound heard equally in both ears. Rinne test: air conduction is better than bone conduction bilaterally. Nystagmus cannot be seen. Stands straight in Romberg position. Does not deviate at Bárány test. Does not sway or fall when walking with eyes closed.

IX.-X. The uvula is central. The palatal arches are symmetrical. The palatal and gag-reflexes are of medium intensity and can be evoked on both sides. Swallowing and phonation are performed well. Recognizes tastes and feels them equally on both sides on the posterior one-third of the tongue.

XI. The shape, bulk, tone and strength of the trapezioid and sternocleidomastoid muscles are equal on both sides. Shrugging the shoulders and turning the head to each side against resistance is performed with normal strength.

XII. The protruded tongue is central. Neither atrophy nor fasciculation can be observed.

Motor function

The bulk, tone and strength of the skeletal muscles are intact throughout the extremities and the trunk. Holds both upper and lower limbs lifted outstretched into the air. There is no pronator drift. Able to walk on heels and toes. No involuntary movements are present.

Sensation

Senses touch with a small wisp of cotton, pin prick, heat and cold equally on all extremities and the trunk bilaterally. Position sense and small joint movement sense is intact in all 4 extremities. Recognizes numerals written on the skin over the entire body. Senses vibration equally on both sides. Does not mention any subjective alteration of sensation. Does not extinguish to double simultaneous stimulation.

Reflexes

Medium brisk ("two plus") biceps, brachioradialis, patella and ankle jerks, sluggish triceps and ulnar jerks on both sides. Plantar response flexor. Hoffmann sign can be equally evoked on both sides. No Trömner, Chaddock, Gordon and Oppenheim signs. Bilaterally equal, medium brisk abdominal skin and cremaster reflexes. No palmomental, grasping, sucking and other pathological reflexes.

Coordination

Stands straight in Romberg position. Does not deviate at Bárány test and at blind walking. Tandem gait is normal. The finger-nose and heel-shin tests are performed accurately. No rebound or dysdiadochokinesis.

Autonomic functions

Normal sudomotor and vasomotor activity. The sphincters are reported to function properly.

Mental state: The patient is fully alert, accurately recalls his/her personal data, oriented in space and time. (see: mini mental state in psychiatry).