

## Neurology 5th year – content and scope of practical training

1. Practical knowledge of systematic taking and assessment of patients' medical history
2. **Practical knowledge of basic neurologic examination (please, see the predefined table), the ability to assess, interpret and summarize the findings into a clinical syndrome and propose the steps leading to a (differential) diagnosis**
3. Knowledge of basic neurologic symptoms and syndromes that are presented in the clinical seminars, e-learning, recommended textbooks and Moodle). The knowledge required for 2<sup>nd</sup> week examination are in bold. For the 4<sup>th</sup> week examination, students should know everything in this list.
  - ❖ **Cranial nerve lesions**
    - **n. opticus**
    - **oculomotor nerve (N III) palsy (somatic fibers, superficial parasympathetic fibers)**
    - **trochlear nerve (N IV) palsy**
    - **n. trigeminus**
    - **abducens nerve (N VI) palsy**
    - **facial nerve (N VII) palsy (central versus peripheral)**
    - **nystagmus**
    - **bulbar and pseudobulbar syndrome**
  - ❖ **Speech and swallowing disorders**
    - **Dysarthria**
    - **Dysphonia**
    - **Aphasia**
    - **Dysphagia**
  - ❖ **Abnormalities of muscle tonus - hypotonia, spasticity, rigidity**
  - ❖ **Limb paresis – central – general description**, spastic hemiparesis, spastic paraparesis
  - ❖ **Limb paresis - peripheral – general description**, n. ulnaris, radialis, medianus, tibialis, peroneus
  - ❖ **Cerebellar syndrome**
  - ❖ **Extrapyramidal syndromes**
    - **Parkinsonian syndrome, tremor**, chorea, dystonia, myoclonus, tics
  - ❖ **Meningeal syndrome**
  - ❖ **Gait abnormalities / disorders**
    - **antalgic**
    - **spastic**
    - **Wernicke-Mann posture (spastic-hemiparetic gait)**
    - **cerebellar**
    - **parkinsonian**
    - **frontal apraxia, gait apraxia**
    - **myopathic**
  - ❖ **Equilibrium disorders**
    - **cerebellar ataxia**
    - **proprioceptive ataxia**
    - **vestibular disorders**
4. **Clinical entities or syndromes and their examinations**, that each student must see (at least video presentation) (lectures, e-learning, Moodle) and if possible on the ward; students should examine at least some of these patients):
  - ❖ coma (of unclear etiology)
  - ❖ concussion (commotio cerebri)
  - ❖ vertigo (+ differential diagnosis)
  - ❖ headache (+ differential diagnosis)
  - ❖ radicular syndrome (+ cauda equina syndrome)
  - ❖ polyneuropathy
  - ❖ stroke (ischemic, haemorrhagic)
  - ❖ epileptic seizure („grand mal“, generalized tonic clonic seizures)
  - ❖ Parkinson disease
  - ❖ Multiple sclerosis
  - ❖ Dementia