

Cranial Nerve Examination and Evaluation Study Guide

Indications for neurological examination and evaluation

There are a variety of situations where cranial nerve examination is indicated. There are also situations where cranial nerve examination is not indicated or of lesser importance when compared to other tests and measures. The determination of whether to perform cranial nerve examination is based on the presence or absence of specific symptoms or red flags.

The following is an abbreviated list of the most common neurological signs and symptoms that require further examination and evaluation.

- Head, facial or dorsal neck pain or head, neck or spinal injury.
- Disregard or neglect of a body part or lack of awareness of injury or pain.
- Altered movement patterns (e.g., involuntary, unsteady, or slow movements, tremors or twitching of facial muscles).
- Change in muscle tone (e.g., spasticity or rigidity).
- Change in balance or coordination (e.g., clumsiness) or unsteady or altered gait; especially changes resulting in falls or injury.
- Muscle weakness or wasting.
- Paralysis or paresis.
Slurred or altered speech patterns or drooling, or difficulty swallowing.
- Paresthesia (e.g., tingling, pricking, burning, and numbness) or change in somatosensation (e.g., altered hot/cold, sharp/dull or light touch sensation).
- Change or alteration in sense of hearing (e.g., hearing loss or buzzing in ears), sight (e.g., blurry vision, diplopia, or visual field changes), smell (e.g., anosmia) or taste.
- Change in behavior, personality or cognition, or difficulty concentrating or thinking, confusion or lethargy; including changes expressed by friends and family members.
- Change in sleep-wake cycles, sleep disturbances, difficulty falling asleep or the need to sleep too much.
- Vertigo, fainting, dizziness or seizures.