# **Neurological History**

- Progression of symptoms & signs is vital clue:
  - Gradula deterioration ≈ tumour
  - Intermittent exacerbations ≈ MS
  - o Rapid onset ≈ stroke
- Ask right or left handed

#### PC

- Headache:
  - o Diff to usual headaches
  - Unilat or bilat
  - o Aura
  - o Meningism
  - Worse on waking ≈ ↑ICP
  - ↓concious level
- weakness:
  - o speed of onset
  - sensory loss
  - sphincter disturbance
  - loss of balance
  - assoc root pain
- visual disturbance:
  - blurring/visual loss
  - diplopia
  - o photophobia
  - pain?
  - Speend of onset
- Special senses
- Dizziness:
  - Vertigo
  - Hearing loss/tinnitus 0
  - LOC
- Speech disturbance:
  - o Onset
  - o Type
- Dysphagia
- Fits/faints/funny turns:
  - o Duration
  - Mode of onset
  - Preceeding aura 0
  - LOC 0
  - Tongue biting
  - Incontinence 0
  - Residual weakness/confusion
  - FΗ 0
- Skin sensation:
  - Distribution
  - Assoc weakness
- Tremor:
- Rapid or slow
- Present at rest

- Worse on deliberate movements
- o Taking B agoinsts
- o Any thyroid problems
- o FH

## **Cognitive State**

- AMT:
- o Age
- o DOB
- o Time
- o Year
- Tell pt name of address to remember "42 West Street"
- o Hospital name?
- o Recognise two people
- o Date of second world war
- o Name of present monarch
- o Count backwards 20-1

### **PMH**

- ?meningitis/encephalitis
- head/spine trauma
- seizures
- vascular RFs:
  - o AF
  - o HT
  - o Hyperlipidaemia
  - o DM
  - o Smoke
- Chance of pregnancy risk of eclampsia

#### FH

• Any neuro disease

#### DH

- Anticonvulsant/antipsychotic/antidepressant meds
- Psychotropic drugs eg ecstasy
- Meds with neuro side effects eg isoniazid