

Neurological Assessment Workshop

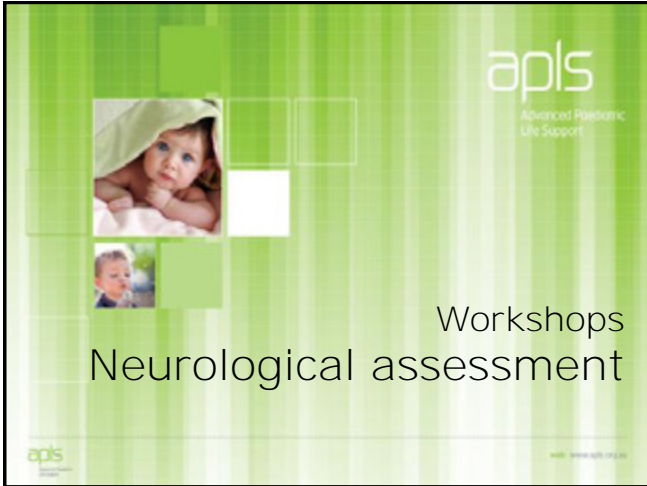
Instructor Notes

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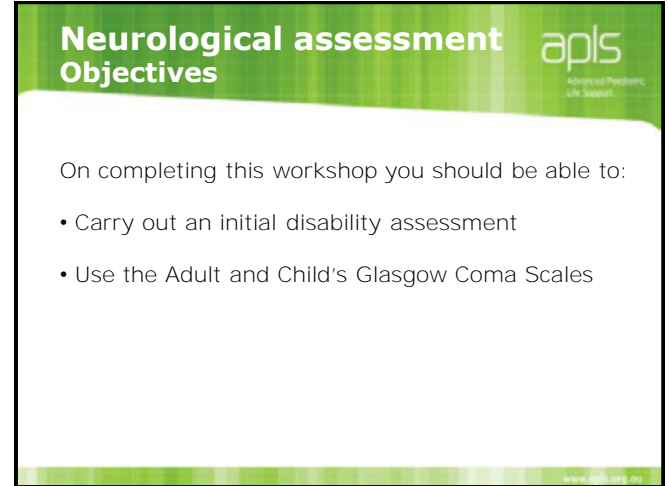
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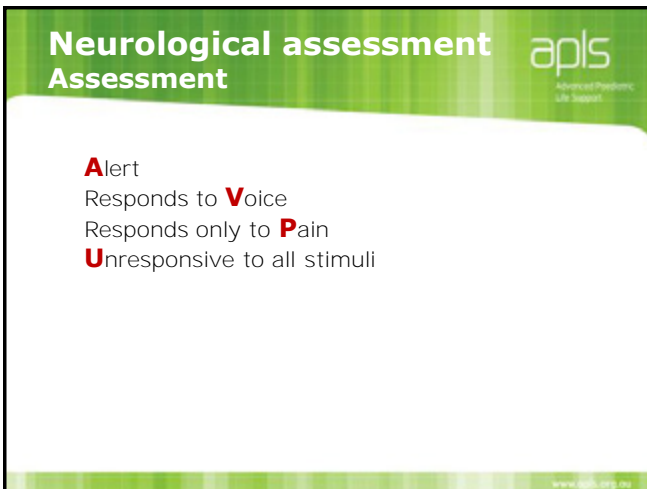
Slide 1



Slide 2



Slide 3



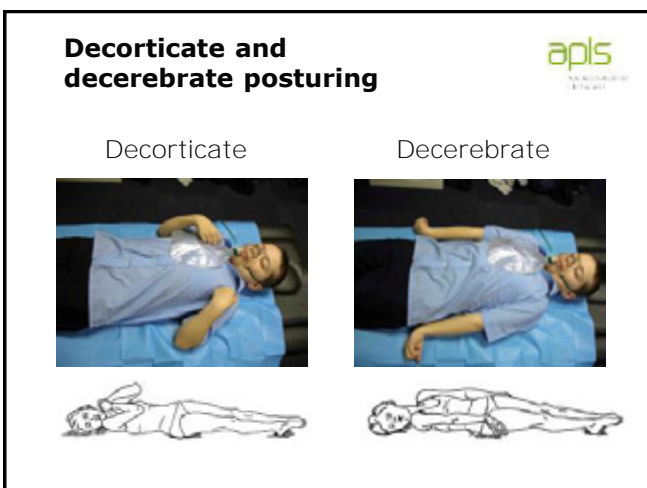
Slide 4

Glasgow Coma Scale (14-15 years)		Children's Glasgow Coma Scale (<4 years)	
Response	Score	Response	Score
Eye opening			
Spontaneously	4	Spontaneously	4
To verbal stimuli	3	To verbal stimuli	3
To pain	2	To pain	2
No response to pain	1	No response to pain	1
Best motor response			
Obeys verbal command	6	Spontaneous or obeys verbal command	6
Localises to pain	5	Localises to pain or withdraws to touch	5
Withdraws from pain	4	Withdraws from pain	4
Abnormal flexion to pain (decorticate)	3	Abnormal flexion to pain (decorticate)	3
Abnormal extension to pain (decerebrate)	2	Abnormal extension to pain (decerebrate)	2
No response to pain	1	No response to pain	1
Best verbal response			
Orientated and converses	5	Alert, babbles, uses words to usual ability	5
Disorientated and converses	4	Less than usual words, spontaneous incoherent cry	4
Inappropriate words	3	Cries only to pain	3
Incomprehensible sounds	2	Moans to pain	2
No response to pain	1	No response to pain	1

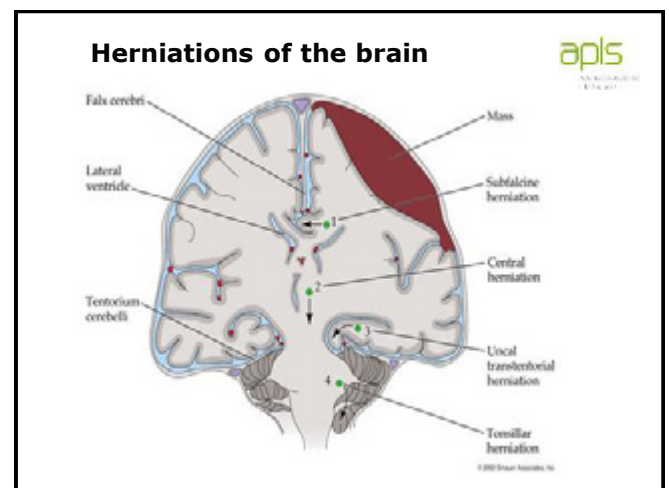
Glasgow Coma Scales
For ages 4-15 and children's scale (<4 yrs)

Ch11 p121

Slide 5



Slide 6




Instructor Notes

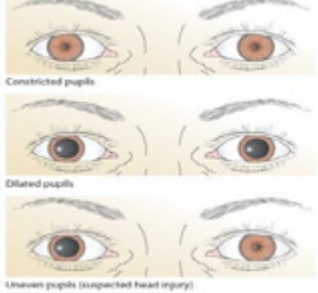
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Slide 7

Pupil signs in comatose patient 



- **Constricted pupils**
- **Dilated pupils**
- **Unequal pupils (suspected head injury)**

- **Pontine lesion, opiates**
- **Terminal**
- **Ischaemic brain injury**
- **Atropine drops**
- **Belladonna poisoning**
- **Transtentorial herniation**


Moderately dilated unreactive pupils:

- **Mid brain lesions**

Small, equal and reactive:

- **Toxic / metabolic**

Slide 8

Neurological assessment Directed case 1 


Initial information

- A 6 year old girl had been vomiting for one day. Her parents found her drowsy this morning and brought her to hospital. She does not respond to her mother's voice. She is opening her eyes to pain, withdrawing to painful stimuli and moaning.

Further information

- Blood sugar is low and liver enlarged.

Slide 9

Neurological assessment Directed case 2 

Initial information

- The parents of an 18 month old boy find him unconscious in the morning.


Further information

- On arrival at hospital ABC are normal. He is unresponsive and has pinpoint pupils.

Further information

- 15 minutes after administration of naloxone he begins to become drowsy again. On reassessment at that time his eyes open when you shout his name, he reaches towards a painful stimulus and then cries inconsolably.

Slide 10

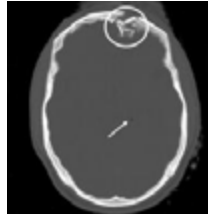
Neurological assessment Directed case 3 

Initial information

- A 5 year old boy pulled a marble urn down which struck him on the right frontal temporal area. There was LOC for 15 minutes.

Further information


- On arrival at hospital, he was moaning. He withdrew from pain and opened his eyes to pain. His right pupil was dilated and responded sluggishly to light. He had a boggy right cephalhaematoma and no signs of a base of skull fracture.



Further information

- He was intubated. IV access was obtained and he was given IV Mannitol (1 Gm / Kg).
- He was taken around to CT when he was stabilised.

Slide 11


Neurological assessment Directed case 4 

Initial information


- 9 years old boy who fell from a tree from height of approximately 5 metres. Hit his head at the back on a tree root. LOC for 7minutes.


Further information

- On arrival at ED, he was alert. Both pupils were equal and reactive to light. He had no focal neurology. He had a right haemotympanum.
- Should he have a CT non-contrast head?



Slide 12






Advanced Paediatric Life Support

Q&A

Neurological assessment



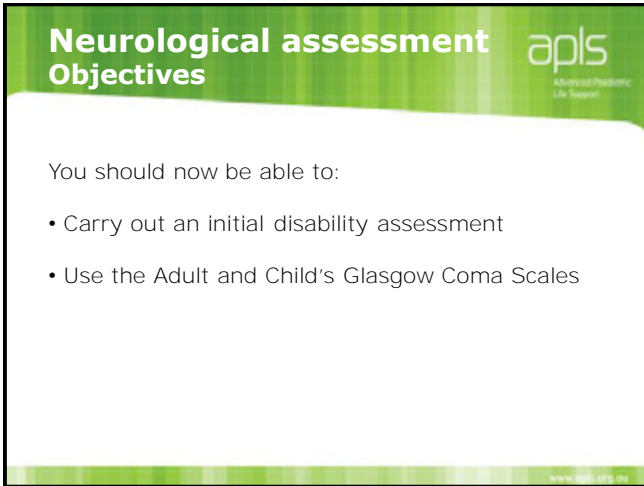
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Slide 13



The slide features a green header with the text "Neurological assessment Objectives" and the "apls" logo. The main content area is white and contains a list of objectives. The footer is green and contains the website address "www.apls.org.uk".

Neurological assessment Objectives

You should now be able to:

- Carry out an initial disability assessment
- Use the Adult and Child's Glasgow Coma Scales

www.apls.org.uk