

**MASARYK UNIVERSITY BRNO**

**School of Medicine**

**1st Department of Neurology, St. Anne's University Hospital, Brno, Pekařská 53**

**Tel/fax: 543 182 624**

**Attendance list. Neurology lectures - Physiotherapy**

Surname and name (including maiden name):

Date of Birth:

Personal contact:

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Date and teacher's signature

**1.**

Neurology clinical record, history and diagnosis in neurology. Reflexes. Lower and upper motor neuron lesion.

**2.**

Cranial nerves examination. Examination of cerebellum, neurological examination in movement disorders.

**3.**

Examination of sensitivity, sensitive syndromes, meningeal syndrome and signs. History in patients with headache, intracranial hypertension.

**4.**

Spinal column examination. Radicular and pseudo-radicular syndromes at upper and lower limbs.

**5.**

Higher cognitive function disorders: aphasias, alexia, agraphia, acalculia, gnostic and praxis disorders. Basic diagnostic methods in neurology (EEG, EMG, EP, CSF, neuroimaging).

**6.**

Examination of a comatose patient

**7.**

Summary + Credit

**Credit awarded: date:**

Teacher's signature:

**Practical exam (Neurology): date .....**

Questions:

- 1.
- 2.
- 3.

**Grade:**

Teacher's signature:

**Theoretical exam (Neurology) date .....**

Questions:

- 1.
- 2.
- 3.

**Final grade:**

Teacher's signature: