

# DIVE ACCIDENT: RAPID FIELD NEUROLOGIC EXAM RECORD

Answer yes or no.

## Mental Status: Does He/She Know

- 1a. His/her name? \_\_\_\_\_
- 1b. Where he/she is? \_\_\_\_\_
- 1c. Time of day? \_\_\_\_\_
- 1d. Most recent activity? \_\_\_\_\_
- 1e. Speech is clear, correct? \_\_\_\_\_

## Sight

- 2a. Correctly counts fingers? \_\_\_\_\_
- 2b. Vision clear? \_\_\_\_\_

## Eye Movement

- 3a. Move all four directions? \_\_\_\_\_
- 3b. Nystagmus absent? \_\_\_\_\_

## Facial Movements

- 4a. Teeth clench okay? \_\_\_\_\_
- 4b. Able to wrinkle forehead? \_\_\_\_\_
- 4c. Tongue moves all directions? \_\_\_\_\_
- 4d. Smile symmetrical? \_\_\_\_\_

## Head/Shoulder Movements

- 5a. Adam's apple moves? \_\_\_\_\_
- 5b. Shoulder shrug normal, equal? \_\_\_\_\_
- 5c. Head movements normal, equal? \_\_\_\_\_

## Hearing

- 6a. Normal for that diver? \_\_\_\_\_
- 6b. Equal in both ears? \_\_\_\_\_

## Sensations: Present, Normal, and Symmetrical Across

- 7a. Face? \_\_\_\_\_
- 7b. Chest? \_\_\_\_\_
- 7c. Abdomen? \_\_\_\_\_
- 7d. Arms (front)? \_\_\_\_\_
- 7e. Hands? \_\_\_\_\_
- 7f. Legs (front)? \_\_\_\_\_
- 7g. Feet? \_\_\_\_\_
- 7h. Back? \_\_\_\_\_
- 7i. Arms (back)? \_\_\_\_\_
- 7j. Buttocks? \_\_\_\_\_
- 7k. Legs (back)? \_\_\_\_\_

## Muscle Tone: Present, Normal, and Symmetrical for

- 8a. Arms? \_\_\_\_\_
- 8b. Legs? \_\_\_\_\_
- 8c. Hand grips? \_\_\_\_\_
- 8d. Feet? \_\_\_\_\_

## Balance and Coordination

- 9a. Romberg okay? \_\_\_\_\_
- 9b. If supine, heel-shin slide okay? \_\_\_\_\_
- 9c. Alternating hand movements okay? \_\_\_\_\_