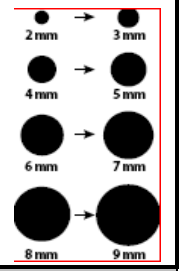
Neuro Vital Signs

Write Neuro VS Order Here:

							MEND EXAM										PUPIL SIZE		PUPIL RESPONSE		
							MENTAL STATUS				CRANIAL NERVES			LIMBS							
							LOC	SPEECH	QUESTIONS	COMMANDS	FACIAL DROOP	VISUAL FIELDS	HORIZONTAL GAZE	COORDINATION	LIMBS MOTOR	LIMBS SENSORY	RIGHT	LEFT	RIGHT	LEFT	
Date	Time	Temp	O2 Sat	BP	HR	RR															Initials



LOC
A = Alert
V = Verbal
P = Responds to pain
U = Unresponsive

SPEECH
Have patient say, "You can't teach an old dog new tricks"
N = No wrong words, no slurring
D = Wrong words, and/or slurring
M = Mute

QUESTIONS
Ask patient age/month
0 = Neither correct
1 = One answer correct
2 = Both answers correct

COMMANDS
Tell patient to close, open eyes:
Y = Able to close, open eyes
N = Unable to follow commands

FACIAL
N = WNL: Equal # teeth seen on both sides when smiling
R = Right droop
L = Left droop

VISUAL FIELDS
N = No deficit noted; recognizes finger
R = Right visual field deficit
L = Left visual field deficit

HORIZONTAL GAZE
N = No deficit
R = Right gaze preference
L = Left gaze preference

COORDINATION
N = Normal finger to nose and heel to shin
RUE, RLE, LUE, LLE = location of deficit

LIMBS MOTOR
N = No drift, weakness
RUE, RLE, LUE, LLE = location of deficit

LIMBS SENSORY
N = No deficit; feels light pinch
RUE, RLE, LUE, LLE = Location of deficit deficit

PUPIL SIZE
___ mm (refer to pupil chart above)
B = Blown
P = Pinpoint

PUPIL RESPONSE
P = Prompt
S = Sluggish
U = Unresponsive

Signature	Initials	Signature	Initials

Patient has history of CVA and has the following residual deficits:

Patient Label

*Date is needed once per day next to the time.

Revised 6-3-2010

Permament part of the medical record.

Neuro Vital Signs

Write Neuro VS Order Here:

Date	Time	Temp	O2 Sat	BP	HR	RR	MEND EXAM: MENTAL STATUS: LOC	SPEECH	QUESTIONS	COMMANDS	CRANIAL NERVES: FACIAL DROOP	VISUAL FIELDS	HORIZONTAL GAZE	LIMBS: COORDINATION	LIMBS MOTOR	LIMBS SENSORY	PUPIL SIZE: RIGHT	LEFT	PUPIL RESPONSE: RIGHT	LEFT	Initials

Signature	Initials	Signature	Initials

Onslow Memorial Hospital — Where People Care

Patient Label

*Date is needed once per day next to the time.

Revised 6-3-2010

Permament part of the medical record.