1- AMS		MRN
Name	Age	
Admitted to	for	PMHx
Admitted to	101	☐ HTN
Consulted for		□ DM
□ Onset?		□ HLD
☐ Progression		□ Stroke
☐ Intermittent?		□ Migraine
☐ Hallucinations		☐ Epilepsy
☐ Depressed mode		
☐ Agitation		
□ Verbal abuse		
□ Physical abuse		
□ Falls		
□ Gait		
☐ Head injury		
☐ Weakness		
□ Numbness		
☐ Sleeping		
☐ Baseline mental status:		
□ AAOx □ Hold conversation	2	
□ Financial	1	
□ Bathroom		
□ Shower		
□ Cooking		
□ Groceries		
☐ Getting lost		
☐ Ambulation		
Previous work up		

General	PSHx		
☐ Fever/chills	Meds:		
☐ Weight loss	Weds.		
Neuro □ Headache			
□ Dizziness		mg	q
□ Vision		ma	_
□ Hearing		mg	q
□ Tinnitus		mg	a
☐ Speech/slurred			q
□ Swallowing □ Numbness		mg	q
☐ Weakness		<u> </u>	1
☐ Neck/back pain		mg	q
□ Seizure/LOC		ma	_
□ Saddle anesthesia		mg	q
☐ Memory issues		mg	a
☐ Gait/balance☐ Incontinence ☐		,	q
CVS/Resp		mg	q
☐ Chest pain			1
□ Palpitations	Social history:		
□ Cough	☐ Lives with		otion
□ SOB		□ Occup	ation
GI/GU □ Nausea/vomiting	□ ADLs		
☐ Diarrhea/ constipation			
□ Dysuria	☐ Smoking: cig, For years, Q	uitted	vears ago
Infectious	y y	,	7
□ Recent travel			
☐ Sick contacts	☐ Alcohol: glasses, For years,	Quitted _	years
□ Rash Msk	ago		
☐ Stiffness			
□ Joint pain	□ Maniiyana		
□ Muscle pain	□ Marijuana:		
	□ Drug use: Family history:		
	☐ Stroke ☐ Brain tumors		□ Epi-
	lepsy		
	VS: T , BP , HR , RR	, O2s	sat ,
	FS		
	MS: AOx3, follow 3 steps commands/ memory/ we CN: Pupils, VF, face sensation, nystagmus	ekdays bacl	cwards
	Motor: Bulk/ Tone/Drift/Power		
	Sensory: PP, vibration, proprioception Reflexes: plantar reflex/clonus		
	Coordination: FNF/ HTS		
	Gait: Tandem gait/ tiptoe/ heel/ Romberg neg		
	Hb / Na Cl	BUN	/ Ca
☐ MRI sheet	WBC PLT		Glu Mg
☐ Home meds	HCT K CO2	Cr	Phos
☐ Code status	CTU		
□ Allergies	СТН		

2- DZ		MRN	
Name	Age		
		PMHx	
Admitted to	for	□HTN□	DM
Consulted for	\square RHD \square LHD		Stroke
☐ Room spinning		□ Seziures	
□ Sudden □ gradual		☐ Afib	
☐ Onset: d/m/y			
☐ Constant or ☐ Intermitte	nt		
☐ Episode duration se	ecs/mins		
☐ Progression			
☐ How many episodes?			
☐ Releived by			
☐ Aggreviated by:			
☐ Change of post	ion		
☐ Turning head			
☐ Sitting			
☐ Standing			
\square N/V			
☐ Hearing loss ☐ R or	L?		
☐ Tinnitus ☐ R or	L?		
☐ Vision ☐ R or	L?		
□ Cough, runny nose			
☐ Palpitations/ SOB/ sweati	ng		
☐ LOC/ fainting			
□ Falls			
☐ Unbalance? ☐ R or	L?		
Previous work up			
Trevious work up			

General	PSHx		
□ Fever/chills □ Weight loss Neuro	Meds:		
☐ Head trauma☐ Headache		q	mg
☐ Dizziness☐ Vision		q	mg
☐ Hearing ☐ Tinnitus		q	mg
☐ Speech/slurred ☐ Swallowing		q	mg
☐ Numbness ☐ Weakness		q	mg
□ Neck/back pain □ Seizure/LOC		q	mg
□ Saddle anesthesia □ Memory issues		q	mg
☐ Gait/balance ☐ Incontinence		q	mg
CVS/Resp ☐ Chest pain	Social history:		
□ Palpitations □ Cough □ SOB GI/GU	☐ Lives with ☐ ADLs		pation
□ Nausea/vomiting□ Diarrhea/constipa□ DysuriaInfectious	☐ Smoking: ☐ cig, For years		
☐ Recent travel☐ Sick contacts	☐ Alcohol: glasses, For years	s, Quitted	years ago
□ Rash/itching Msk	□ Marijuana:		
☐ Stiffness☐ Joint pain	☐ Drug use: Family history:		
□ Muscle pain	☐ Stroke ☐ Heart disease ☐ Brain tur	mors	
	VS: T , BP , HR , RR , O2sat ,	FS	
	□ Orthostatic vitals □ Dix Hallpike □ Nystagmus □ Head turn test □ Lay	BP H	IR
	□ Cover/uncover Stand		
☐ MRI sheet☐ Home meds☐ Code status☐ Allergies	WBC HCT PLT Na CI BUN K CO2 Cr	Glu	Ca Mg Phos
	СТН		

3- Ey		MRN	
o Ly			
Name	Age	DMIL	
Admitted to	for	PMHx	- DW
		□ HTN	□ DM
Consulted for	Hand dominance \square R \square L	□ HLD	☐ Stroke
□ R eye □ L eye		□ Migrain	e
☐ Blurring or douple?		□ Catarac	t
□ Onset?		☐ Glaucon	na
☐ Sudden or gradual?			
☐ Improving or getting worse			
☐ Curtain? Down, up, or sides	.1		
☐ If double, vertical or horizinta☐ Variability of symptoms?	ll .		
☐ Worsen by end of day?			
☐ Improves with closing one eye	e?		
☐ Pain with eye movement?			
☐ Redness or discharge?			
☐ Eye/head trauma			
☐ Are able to read?			
\square HA: onset, site, progression, r			
☐ Back or neck pain			
☐ Fecal/Urinary inc			
□ Weakness			
□ Numbness□ Recently sick			
☐ Recently insect/tick bite			
☐ Recent travel			
☐ Recently vaccine			
☐ Contraceptive/testosterone u	se		
Description of the con-			
Previous work up			
☐ Opthalmology check up?☐ Glasses? Last checked?			
- Grasses; Last Checkeu;			

General	PSHx		
☐ Fever/chills			
□ Weight loss	Meds:		
Neuro		_	
☐ Headache☐ Dizziness	mg q		
□ Vision □ Hearing	mg q	bracket	
□ Tinnitus□ Speech/slurred	mg q	1	
☐ Swallowing☐ Numbness	mg q	1	
□ Weakness □ Neck/back pain	mg q	1	
☐ Seizure/LOC ☐ Saddle anesthesia	mg q	1	
☐ Memory issues	mg q	1	
☐ Gait/balance☐ Incontinence☐	mg q	\parallel	
CVS/Resp ☐ Chest pain		ᅬ	
☐ Palpitations	Social history:		
□ Cough □ SOB	☐ Lives with ☐ Occupation ☐ ADLs		
GI/GU	☐ Ambulation baseline (cane/walker/wheelchair):		
□ Nausea/vomiting	☐ Mental status basline: AAOx		
☐ Diarrhea/constipation	- Wester State of Sasanies I Fort		
□ Dysuria			
Infectious	☐ Smoking: cig, For years, Quitted years ago		
□ Recent travel			
☐ Sick contacts	☐ Alcohol: glasses, For years, Quitted years ag		
□ Rash	Theorioi glasses, for years, Quitted years ag	٦	
Msk □ Stiffness			
☐ Joint pain	□ Marijuana:		
□ Muscle pain	☐ Drug use:		
письете рапт			
	Family history:		
	☐ Stroke ☐ Neurological disorders ☐ Brain tumors		
	VS: T , BP , HR , RR , O2sat ,	FS	
	Exam: Temporal tenderness VF Eye movement Pupils APD Ptosis Fatiguable ptosis Fatiguable diplopia Fundoscopy Ice Pack test (3 mins)		
☐ MRI sheet☐ Home meds	Hb / Na Cl BUN / Ca		
☐ Code status	WBC PLT Glu Mg		
☐ Allergies	HCT K CO2 Cr Phos		
	CTH		
	1		

A IIA		MRN
4- HA		
Name	Age	
Admitted to	for	PMHx
		□ HTN □ DM
Consulted for		☐ HLD ☐ Stroke
O*4		
☐ Site		□ Migraine
☐ Sudden ☐ gradual		
☐ Onset: d/m/y		
☐ Severity: /10		
☐ Constant or intermittent		
☐ Character		
☐ Radiation		
☐ Releived by		
☐ Aggreviated by:		
☐ Change of postion	on	
□ Morning?		
□ Cough		
□ Valsava		
□ N/V:		
□ Aura		
☐ Photophobia ☐ Phonophol	oia:	
☐ Vision:		
□ Head injury		
☐ Previous headache feature	S:	
□ Previous work up		

Compani	PSHx		
General ☐ Fever/chills	Meds:		
☐ Weight loss		1	
Neuro □ Head injury		q	mg
☐ Headache ☐ Dizziness		q	mg
□ Vision □ Hearing		q	mg
☐ Tinnitus☐ Speech/slurred		q	mg
□ Swallowing□ Numbness		q	mg
☐ Weakness ☐ Neck/back pain		q	mg
☐ Seizure/LOC ☐ Saddle anesthesia		q	mg
☐ Memory issues ☐ Gait/balance ☐ Incontingues		q	mg
☐ IncontinenceCVS/Resp	Social history:		
□ Chest pain□ Palpitations□ Cough□ SOB	☐ Lives with ☐ ADLs	□ Occupa	ition
☐ Nausea/vomiting	□ Diarrhea/constipation □ Smoking: □ cig, For years, Quitted year □ Dysuria		
☐ Recent travel☐ Sick contacts☐	☐ Alcohol: glasses, For years,	Quitted	years ago
□ Rash Msk	□ Marijuana:		
☐ Stiffness	□ Drug use:		
□ Joint pain □ Muscle pain	Family history:		
	☐ Stroke ☐ Heart disease ☐ Brain tum	ors	
	VS: T , BP , HR , RR , O2sat , FS	S	
	MS: AOx3, follow 3 steps commands/ memory/ we CN: Pupils, VF, face sensation, nystagmus Motor: Bulk/ Tone/Drift/Power Sensory: PP, vibration, proprioception Reflexes: plantar reflex/clonus Coordination: FNF/ HTS Gait: Tandem gait/ tiptoe/ heel/ Romberg neg	ekdays back	wards
☐ MRI sheet☐ Home meds☐ Code status	WBC HCT PLT Na CI BUN K CO2 Cr	Glu	Ca Mg Phos
□ Allergies	СТН		

5-SZ		MRN	
O SL			
Name	Age		
Admitted to	for	PMHx	
Consulted for	□ RHD □ LHD	□ HTN	\square DM
		□ HLD	☐ Stroke
□ When?		□ Migraino	e
☐ Eyes		☐ Epilepsy	7
☐ Foaming			
☐ Tongue biting☐ Limbs			
☐ How long?			
☐ Confusion?			
│ │ □ Aura?			
□ UI/BI			
☐ Triggers:			
☐ Missed meds			
□ Sleep			
\square Stress			
☐ Recently sick			
☐ Last seizure?			
☐ How many during last year?			
☐ Head injury			
☐ Recent change of meds			
☐ Meningitis			
□ Encephilitis□ Febrile seizures			
☐ Baseline ambulation			
☐ Baseline mental status: AAOx	conversation financial		
bathroom, shower, cooking, gro			
☐ Weight			
Previous seziures semiology			
Previous work up:			
☐ Neurologist name? Phone nu	mber		
□ Diagnosis?			
□ EEG?			
☐ Imaging?			
İ		1	

General	PSHx		
□ Fever/chills □ Weight loss	Meds:		
Neuro ☐ Headache		mg	q
□ Dizziness □ Vision		mg	q
☐ Hearing ☐ Tinnitus		mg	q
☐ Speech/slurred ☐ Swallowing		mg	q
☐ Numbness ☐ Weakness		mg	q
□ Neck/back pain □ Seizure/LOC		mg	q
☐ Saddle anesthesia ☐ Memory issues		mg	q
□ Gait/balance □ Incontinence		mg	q
CVS/Resp ☐ Chest pain			
□ Palpitations	Social history:		
□ Cough □ SOB	☐ Lives with ☐ ADLs		pation
GI/GU □ Nausea/vomiting	ADLS		
 □ Nausea/vomiting □ Diarrhea/constipation □ Dysuria Infectious □ Recent travel 	☐ Smoking: ☐ cig, For years, Quitted years ago		
☐ Sick contacts ☐ Rash	☐ Alcohol: glasses, For years	s, Quitted	years ago
Msk □ Stiffness □ Joint pain □ Muscle pain	□ Marijuana: □ Drug use:		
	Family history:		
	☐ Stroke ☐ Brain tumors		□ Epilepsy
	VS: T , BP , HR , RR	, 02	2sat , FS
	MS: AOx3, follow 3 steps commands/ memory/ v CN: Pupils, VF, face sensation, nystagmus Motor: Bulk/ Tone/Drift/Power Sensory: PP, vibration, proprioception Reflexes: plantar reflex/clonus Coordination: FNF/ HTS Gait: Tandem gait/ tiptoe/ heel/ Romberg neg	veekdays ba	ckwards
□ MRI sheet□ Home meds□ Code status□ Allergies	WBC HCT PLT Na CI BUN K CO2 Cr CTH	Glu	Ca Mg Phos

6-WK			MRN	
Name	Age			
A docité o de o			PMHx	
Admitted to	for		□ HTN	\Box DM
Consulted for			□ HLD	☐ Stroke
□ RHD □ LHD			□ Migrair	ne
□ Where?			☐ Epileps	
□ Onset?				
☐ Sudden or gradual				
☐ Improving or getting wo	orse			
□ Numbness				
☐ Muscle cramps / pain☐ How many blocks you w	vallz?			
☐ Improves with activity	aix:			
☐ Difficulty standing				
☐ Difficulty going up stairs	S			
☐ Difficulty combing hair				
☐ Difficulty opening jars /	bottles/ door knobs	5		
□ Tremor				
□ Back or neck pain				
☐ Urinary inc				
□ Fecal inc				
☐ Tick bite				
☐ Recently sick				
☐ Recent travel				
☐ Recently vaccine				
☐ Contraceptive/testoster	one use			
☐ Baseline:				
☐ Ambulation:				
☐ Mental status: AAOx	_			
\square Cooking \square bath \square show	_	ance \square groceries		
\square going out \square conversatiio	on			
Previous work up				

General	PSHx		
☐ Fever/chills			
☐ Weight loss	Meds:		
Neuro □ Headache		mg	
□ Headache □ Dizziness		1118	q
□ Vision		mg	q
☐ Hearing			4
☐ Tinnitus		mg	q
□ Speech/slurred			1
□ Swallowing		mg	q
☐ Numbness			
☐ Weakness		mg	q
□ Neck/back pain □ Seizure/LOC		ma	
☐ Saddle anesthesia		mg	q
☐ Memory issues		mg	
□ Gait/balance		8	q
□ Incontinence		mg	q
CVS/Resp			9
☐ Chest pain	Social history		
☐ Palpitations	Social history:		
□ Cough □ SOB	☐ Lives with	□ Occupa	tion
GI/GU	□ ADLs		
□ Nausea/vomiting			
☐ Diarrhea/constipation			
□ Dysuria			
Infectious	\square Smoking: \square cig, For years, (Quitted	_ years ago
□ Recent travel □ Sick contacts			
☐ Rash	☐ Alcohol: glasses, For years, •	Ouitted	vears ago
Msk	Heorioi glasses, For years,	Quitted	years ago
□ Stiffness			
□ Joint pain	□ Marijuana:		
□ Muscle pain	□ Drug use:		
	Family history:		
	☐ Stroke ☐ Heart disease ☐ Brain tumo	ors 🗆 Epile	epsy
	VS: T , BP , HR , RR	, O2s	at , FS
	Exam: Counting to 20 Neck F/E, rotation Fatigable testing Anal tone		
□ MRI sheet□ Home meds□ Code status□ Allergies	WBC HCT PLT Na CI BUN K CO2 Cr	Glu	Ca Mg Phos

7-Str Code time::									
Name		Age			MRN				
LKW::_						□ HTN			
P/w:						☐ Stroke	□ Migraine		
						□ Epilepsy	√ □ Afib		
VS: T ,	ВР	, HR	, RR	, O2sat	, FS				
	<u> </u>								

1a. LOC	0 = Alert keenly responsive 1 = Not Alert but arousable by minor stimulation to obey, answer, respond 2 = Not Alert; requires repeat stimulation, obtunded, requires strong stimuli 3 = Reflex motor or autonomic effects response, totally unresponsive, flaccid		
1b. LOC Questions. Month Age	0 = Answers both questions 1 = Answers one question 2 = Answers none		
1c. LOC Commands. Open & close eyes Grip & release	0 = Performs both tasks 1 = Performs one task 2 = Performs none		
2. Best Gaze. Horizontal plane Oculocephalic	0 = Normal 1 = Partial Gaze Palsy; no forced deviation or total gaze paresis 2 = Forced deviation; total gaze paresis not overcome by oculocephalic man.		
3. Visual fields (quadrants) Finger counting Visual threat	0 = No visual loss 1 = Partial hemianopia 2 = Complete hemianopia 3 = Bilateral hemianopia (including cortical blindness).		
4. Facial Palsy. Show teeth Raise eyebrows	0 = Normal symmetrical movement 1 = Minor paralysis (flattened nasolabial fold, asymmetry on smiling) 2 = Partial paralysis (total or near total paralysis of lower face) 3 = Complete paralysis of one or both sides (no upper/lower face mvmt).		
5. Motor Arm. Palm down 900 (if sitting) 450 (if supine) For 10/5 seconds.	0 = No drift; for full 10/5 seconds 1 = Drift, but does not hit bed 2 = Some effort against gravity, but hit bed. 3 = No effort against gravity, limb falls 4 = No movement RUE LUE LUE LUE LLE		
7. Limb Ataxia. Finger – nose & heel – shin	0 = Absent 1 = Present in one limb 2 = Present in two limbs		
8. Sensory. Sensation or grimace to pin	0 = Normal 1 = Mild/moderate sensory loss; may be dulled/"Not as sharp" 2 = Severe/total sensory loss; not aware of face/arm/leg being touched.		
9.Best Language. Explain picture Naming Reading	0 = No aphasia, normal 1 = Mild / moderate aphasia; but can identify what is happening in picture) 2 = Severe aphasia; (cannot identify pictures) 3 = Mute; global aphasia; no usable speech; or auditory comprehension		
10.Dysarthria. Read or repeat words from list.	0 = Normal articulation 1 = Mild / Moderate; slurs some words; understood w/some difficulty. 2 = Severe, unintelligible; mute/anarthric		
11.Extinction & Inattention.	· · · · · · · · · · · · · · · · · · ·		
	TOTAL		
	T		

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 □ RHD □ LHD □ Where is the weakness? □ Onset? □ Sudden or gradual □ Improving or getting wors □ Muscle cramps / pain □ Improves with activity □ Difficulty standing □ Difficulty going up stairs □ Difficulty combing hair / de □ Numbness □ Back or neck pain 	□ Recently sick □ Tick bite □ Recent travel □ Recently vaccine □ Contraceptive/testosterone □ Baseline: □ Ambulation: □ Mental status: AAOx □ Cooking □ bath □ shower □	 □ Tick bite □ Recent travel □ Recently vaccine □ Contraceptive/testosterone use □ Baseline: □ Ambulation: 		
☐ Urinary inc General	Meds:			
□ Fever/chills □ Weight loss		mg q		
Neuro □ Headache		mg q		
□ Dizziness □ Vision		mg q		
☐ Hearing ☐ Tinnitus		mg q		
☐ Speech/slurred☐ Swallowing		mg q		
☐ Numbness ☐ Weakness		mg q		
□ Neck/back pain □ Seizure/LOC □ Saddle anesthesia □ Memory issues □ Gait/balance □ Incontinence CVS/Resp	Social history: □ Lives with □ Occupation □ Smoking: □ cig, For years, Quitted years ago			
☐ Chest pain ☐ Palpitations ☐ Cough ☐ SOB	□ Alcohol: glasses, For years, Quit	ted years ago		
GI/GU □ Nausea/vomiting □ Diarrhea/constipation	□ Marijuana: □ Drug use:			
☐ Dysuria Infectious ☐ Recent travel ☐ Sick contacts ☐ Rash Msk	Family history: □ Stroke □ Heart disease □ Epilepsy			
☐ Stiffness ☐ Joint pain ☐ Muscle pain ☐ MRI sheet ☐ Home meds ☐ Code status ☐ Allergies	WBC HCT PLT Na Cl BUN Glu CTH	Ca Mg Phos		

CODE TIME AGE/SEX	PMH	CODETIME AGE	SEX	PMH
rkm	BP	TRM do		BP
NIHSS	FS	NIH65		FS
CTH	Ac?	СТН		Ac?
CTAHN		CTAHN		
CTP		CTP		
		(10)		
PLAN	NOK	PLAN		NoK
	MRI SAPETY			MIRI SAPETY
	SWAMON			SWANNOW
CODE TIME AGEL SEX	PMH	CODE TIME	AGE/SEX	РМН
rkm clo	BP	LKW	C/o	00
NIHGS	F5	NIHSS		ВР
CTH	Ac?			FS
CTAHN		СТН		Ac?
CTP		CTAHN		
		СТР		
PLAN	Nok	PLAN		NOK
	MRI GAFETY			MRI GAFETY
	GNANHOW			SWALLOW