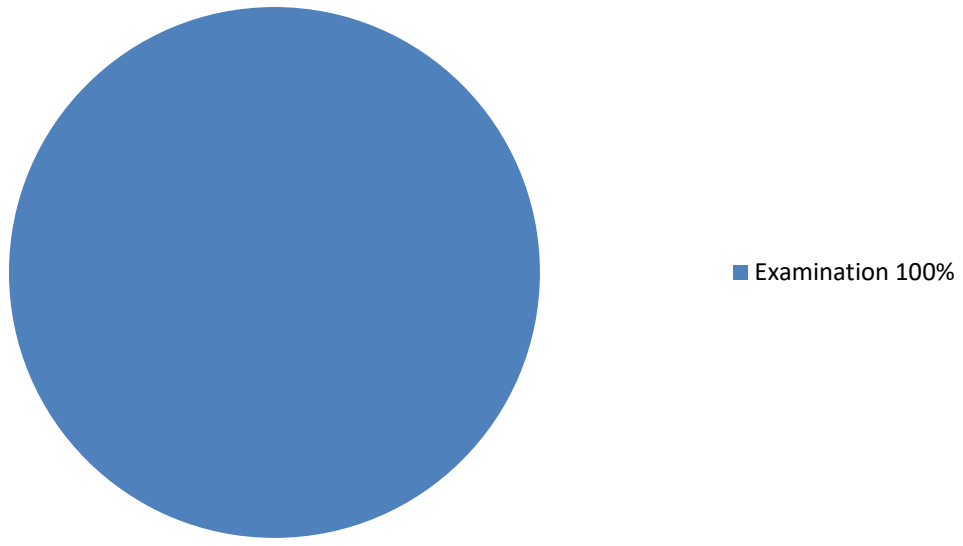


## Marking



Your SHO believes this patient has had a cerebellar stroke., Examine his cerebellar function

Washed hands	
Introduces self	
Checks patient identity	
Obtains verbal consent for interview	
Offers chaperone	
Offers analgesia	
Looks for titubation – head bobbing	
Checks for nystagmus HINTS – appropriate only if multi-directional or continuous (not tiring) nystagmus <ul style="list-style-type: none"> <li>• Head impulse</li> <li>• Nystagmus</li> <li>• Test of skew</li> </ul>	
Checks for staccato or slurred speech “British constitution” “baby hippopotamus”	
Checks for dysdiadokinesis	
Checks for intention tremor, dysmetria <ul style="list-style-type: none"> <li>• Finger-nose</li> </ul>	
Checks lower limb coordination	
Checks for ataxia – asks patient how they were standing on coming in today first! <ul style="list-style-type: none"> <li>• Rombergs test</li> <li>• Gait – heel to toe walk</li> </ul>	
Checks for ipsilateral hypotonia – arms and legs	
Sums up accurately	
Thanks patient	
Patient global score	