





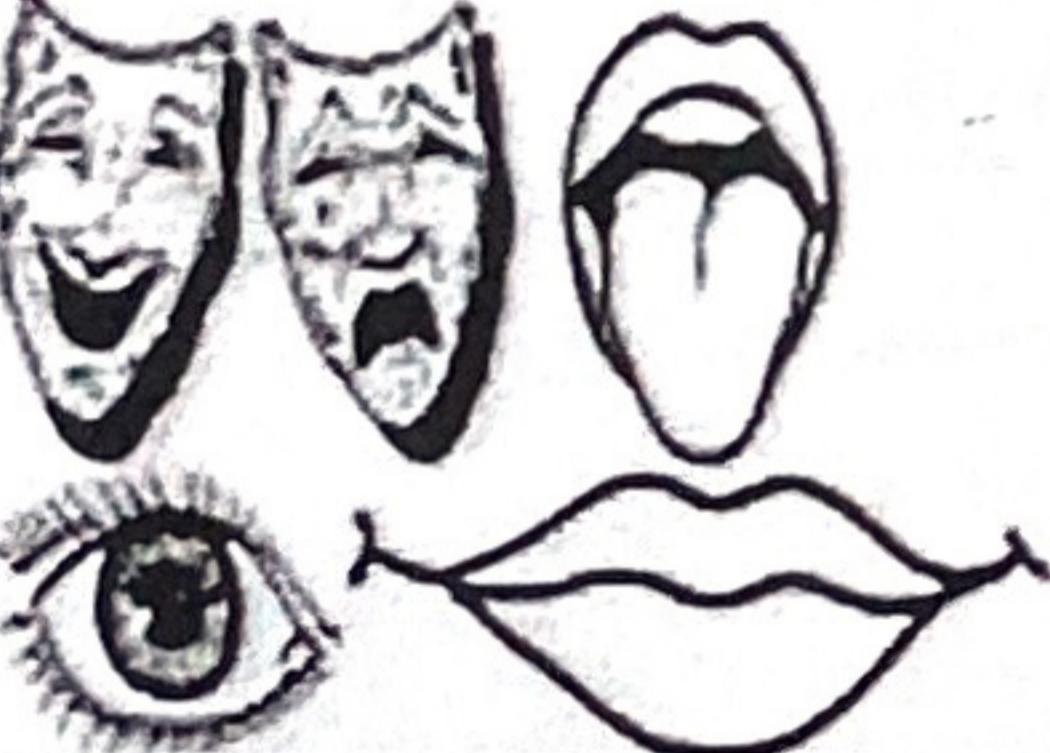







Nerve	Classification	Major functions	Assessment
I Olfactory 	Sensory	Smell	Have patient identify a familiar scent with eyes closed (usually deferred).
II Optic 	Sensory	Vision (acuity and field of vision); pupil reactivity to light and accommodation (afferent impulse)	Have patient read from a card or newspaper, one eye at a time. Test visual fields by having patient cover one eye, focus on your nose, and identify the number of fingers you're holding up in each of four visual quadrants.
III Oculomotor 	Motor	Eyelid elevation; most EOMs; pupil size and reactivity (efferent impulse)	Check pupillary responses by shining a bright light on one pupil; both pupils should constrict. Do the same for other eye. To check accommodation, move your finger toward the patient's nose; the pupils should constrict and converge. Check EOMs by having patient look up, down, laterally, and diagonally.
IV Trochlear 	Motor	EOM (turns eye downward and laterally)	Have patient look down and in.
V Trigeminal 	Both	Chewing; facial and mouth sensation; corneal reflex (sensory)	Ask patient to hold the mouth open while you try to close it and to move the jaw laterally against your hand. With patient's eyes closed, touch her face with cotton and have her identify the area touched. In comatose patients, brush the cornea with a wisp of cotton; the patient should blink.
VI Abducens 	Motor	EOM (turns eye laterally)	Have patient move the eyes from side to side.
VII Facial 	Both	Facial expression; taste; corneal reflex (motor); eyelid and lip closure	Ask patient to smile, raise eyebrows, and keep eyes and lips closed while you try to open them. Have patient identify salt or sugar placed on the tongue (usually deferred).
VIII Acoustic/ Vestibulocochlear 	Sensory	Hearing; equilibrium	To test hearing, use tuning fork or rub your fingers, place a ticking watch, or whisper near each ear. Equilibrium testing is usually deferred.
IX Glossopharyngeal 	Both	Gagging and swallowing (sensory); taste	Touch back of throat with sterile tongue depressor or cotton-tipped applicator. Have patient swallow.
X Vagus 	Both	Gagging and swallowing (motor); speech (phonation)	Assess gag and swallowing with CN IX. Assess vocal quality.
XI Spinal accessory 	Motor	Shoulder movement; head rotation	Have patient shrug shoulders and turn head from side to side (not routinely tested).
XII Hypoglossal 	Motor	Tongue movement; speech (articulation)	Have patient stick out tongue and move it internally from cheek to cheek. Assess articulation.