

Learning objectives – mandatory

The fulfilled and assessed learning objectives must be marked by the student with an x.

The assessment can be performed by the mentor in three ways: direct observation of the student during performance of a clinical activity (see page ii), CPY task (see page P4-P6), Mini-CEX/DOPS (see page v-vi). At the end of completion of the CPY tertial in the respective department, fulfilment of the learning objectives must be signed off by the mentor.

Competence	Objectives completed
Taking a medical history	
1. Taking a targeted, hypothesis-directed history	☐
2. History taking and neurological examination with emergency patients	☐
3. Taking a headache history	☐
4. Taking an epilepsy history	☐
5. Taking history from third parties	☐
6. Taking history in patients with special communication needs, e.g. language or speech problems	☐
Performance of examination techniques	
7. Strength, nutrition, tone (assessment of passive muscle stretch, inspection of muscle bulk, muscle tone, muscle strength and involuntary movements)	☐
8. Fine motor skills, tendon reflexes, pyramidal signs (eliciting peripheral reflexes – triceps, biceps, knee, ankle – and plantar response (Babinski sign))	☐
9. Eliciting complex reflexes: abdominal, anal, masseter, snout, grasp	☐
10. Testing of coordination (finger-to-nose, heel-to-shin, heel-to-toe, diadochokinesis)	☐
11. Assessing mobility and tenderness	☐
12. Inspection of gait (normal, on heels, hopping in one place)	☐
13. Romberg's test, Unterberger's test	☐
14. Recovering of balance after push	☐
15. Assessment of sense of touch and mechanical sense of pain	☐
16. Assessment of sense of temperature, sense of vibration and position sense	☐
17. Assessment of discriminative sensations (e.g. stereognosis)	☐
18. Testing for meningism	☐
19. Testing for cervical and lumbar radicular signs (including Lasegue's sign)	☐
20. Assessment of level of consciousness by means of the Glasgow Coma Scale	☐
21. Assessment of mood and mental status	☐
22. Assessment of memory, MMSE, clock test	☐
23. Assessment of basic and essential activities of daily living	☐

Competence

Objectives completed

24. Neuro-psychological status	☐
25. Identification and correct response to acute life-threatening situations, e.g. stroke, craniocerebral trauma, intracranial pressure, intoxication, unconsciousness, epileptic fits (quick diagnosis, emergency measures, first aid)	☐
26. Identification and correct response to common neurological symptoms and conditions, e.g. headaches, dizziness, peripheral paralysis and pain, Parkinson's, multiple sclerosis, epilepsy	☐
27. Determining the indication of and attaining proficiency in electroencephalography, electromyography and nerve conduction velocity as well as sonography and other imaging procedures (X-ray, computer tomography, magnetic resonance tomography)	☐
Performance of routine skills	
28. Intravenous injection	☐
29. Urinary catheterization	☐
30. Handling a central venous catheter	☐
31. Taking an electrocardiogram at rest	☐
32. Filling out a requisition for instrumental investigations (lab tests, imaging)	☐
33. Attaching a pulse oximeter and interpreting the results	☐
34. Identification of drug side effects and their management	☐
35. Venepuncture	☐
36. Taking blood	☐
37. Intravenous injection and cannulation	☐
Therapeutic measures	
38. Participating in the prescription of neurological drug therapy for in-patients	☐
39. Specialist pain therapy	☐
40. Therapeutic procedures in acute life-threatening situations, e.g. stroke, craniocerebral trauma, intracranial pressure, intoxication, unconsciousness, epileptic fits (quick diagnosis, emergency measures, first aid)	☐
41. Therapeutic procedures in common neurological symptoms and conditions, e.g. headaches, dizziness, peripheral paralysis and pain, Parkinson's, multiple sclerosis, epilepsy	☐

Competence

Objectives completed

Communication with patient/team

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|---|-----------------------|
| 42. Communicating with severely ill patients | ☐ |
| 43. Writing letters for transfer or discharge of patient | ☐ |
| 44. Diagnostic coding | ☐ |
| 45. Working with local / national and international guidelines and protocols | ☐ |
| 46. Specialty-specific quality assurance and documentation | ☐ |
| 47. Summarising, documenting and assessing in writing medical conditions as well as related prognoses | ☐ |

Verified by mentor

Learning objectives – optional

In addition to the competences that are mandatory to achieve, optional competences from the training programmes may also be acquired.

Competence as per training programme	Objectives completed
	☐
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	☐
Verified by mentor	