

MASARYKOVA UNIVERZITA V BRNĚ

Lékařská fakulta/Medical School

I. neurologická klinika, Fakultní nemocnice u sv. Anny v Brně

**Attendance list - Neurology – General Medicine (VL-A)**

Surname and given name:

Identification number (UČO):

E-mail or phone number: \_\_\_\_\_

**WEEK 1**

<b>1. Propedeutics in neurology</b> <span style="float: right;">Date and teacher's signature:</span> Diagnosis in neurology. History in neurology. Reflexes. Lower and upper motor neuron lesion. Cranial nerves examination. Bedside examination of cognitive functions.	
<b>2. Propedeutics in neurology</b> <span style="float: right;">Date and teacher's signature:</span> Cerebellar examination. Examination and phenomenology in movement disorders Examination of somatosensory system. Meningeal signs. Examination of spinal column. Examination of comatous patient.	
<b>3. Morning clinical round-</b> at an in-patient or out-patient ward of the department. According to a schedule.  Doctor's stamp:	<b>Workshop</b>  Date and teacher signature:
<b>4. Morning clinical round</b> at an in-patient or out-patient ward of the department. According to a schedule.  Doctor's stamp:	<b>Workshop</b>  Date and teacher's signature:
<b>5. Morning clinical round-</b> at an in-patient or out-patient ward of department. According to a schedule.  Doctor's stamp:	<b>Workshop</b>  Date and teacher's signature:

**WEEK 2**

<b>6. Stay at the Department of Children Neurology..</b> Neurological diseases in children ( <u>KDN – DFN FNB- Children's hospital</u> )  Date and teacher's signature:
<b>7. Stay at the Department of Children Neurology.</b> Neurological diseases in children ( <u>KDN – DFN FNB - Children's hospital</u> )  Date and teacher's signature:

<p><b>8. Morning clinical round-</b> at an in-patient or out-patient ward of the department. According to a schedule.</p> <p>Doctor's stamp:</p>	<p><b>Workshop</b></p> <p>Date and teacher's signature:</p>
<p><b>9. Morning clinical round-</b> at an in-patient or out-patient ward of the department. According to a schedule.</p> <p>Doctor's stamp:</p>	<p><b>Workshop</b></p> <p>Date and teacher's signature:</p>
<p><b>10. Morning clinical round-</b> at an in-patient or out-patient ward of the department. According to a schedule.</p> <p>Doctor's stamp:</p>	<p><b>Workshop</b></p> <p>Date and teacher's signature:</p>

**WEEK 3**

<p><b>11. Morning clinical round-</b> at an in-patient or out-patient ward of the department. According to a schedule</p> <p>Doctor's stamp:</p>	<p><b>Workshop</b></p> <p>Date and teacher's signature:</p>
<p><b>12. Morning clinical round-</b> at an in-patient or out-patient ward of the department. According to a schedule</p> <p>Doctor's stamp:</p>	<p><b>Workshop</b></p> <p>Date and teacher's signature:</p>
<p><b>13. Morning clinical round-</b> at an in-patient or out-patient ward of the department. According to a schedule</p> <p>Doctor's stamp:</p>	<p><b>Workshop</b></p> <p>Date and teacher's signature:</p>
<p><b>14. Morning clinical round-</b> at an in-patient or out-patient ward of the department. According to a schedule</p> <p>Doctor's stamp:</p>	<p><b>Workshop</b></p> <p>Date and teacher's signature:</p>
<p>15. Graded credit, neurological examination: Questions: 1. 2. 3.</p>	<p>Date:</p> <p>Grade- credit:                      Teacher's signature:</p>

**Oral exam from Neurology.**

Questions:

- 1.
- 2.
- 3.

**Date:**

Final grade:

Teacher's signature: