

**History & Exam – The Neurology of Trauma – 4 Hours**  
**Back To Chiropractic CE Seminars**  
**Presented by Steven C Eggleston, DC, Esq.**

**Objectives**

Participants will be taught common neurological injuries that occur in trauma cases. They should learn to ask important questions during the history-taking process so they can order the correct tests and their examination will lead to the correct diagnosis more frequently.

**Hour 1**

The common neurological symptoms of trauma patients is presented. Injuries are broken down into those afflicting the central nervous system and the peripheral nervous system. They are taught the four areas that cause fingers to tingle between the spinal cord and the fingers that are actually tingling.

**Hour 2**

Participants are taught to inquire during the history-taking process whether the patient's numbness/tingling is constant or occasional and why this question is so important. They are taught that different tests need to be ordered depending on the whether the patient's symptoms are occasional or constant. They will be taught the most common causes of constant numbness/tingling and why an MRI test is likely to discover the patient's exact injury. They will also be taught the most common cause of occasional numbness/tingling and why stress X-rays is the test most likely to correctly diagnosis the patient's injuries.

**Hour 3**

Participants will be taught the three testable parts of nerves, how to test for "drift" in the upper and lower extremities in order to screen for subtle motor dysfunction or weakness in the extremities. They will be taught about Spinal Pain Mapping and how to make an appropriate referral to have this done. They will learn about double crush nerve injuries.

**Hour 4**

Participants will learn why torn ligaments cause neurological symptoms and how to carefully take a history in order to distinguish between various neurological symptoms that are quite similar in presentation but vastly different in causation. They will be taught which X-ray views are most likely to find the source of a patient's neurological symptoms in a trauma case. They will be taught how to differentiate between True Vestibular Syndrome (inner ears) versus torn upper neck ligaments versus brain concussion when the patient has dizziness, vertigo, headaches and balance problems.