Cerebellar Disease Focussed Examination

Note: the instructions may be non-specific e.g. ‘examine this patient with a tremor’, ‘examine this patient’s gait and then proceed’ or ‘examine this patient neurologically’. In this case, approach by asking a few focussed questions (if allowed) or inspecting for tremor/gait abnormalities and then proceed with the relevant focussed examination to elicit all the signs of the condition.

Introduction
Wash hands, Introduce self, ask Patients name & DOB & what they like to be called, Explain examination and get consent

General observation
General
- e.g. wheelchair, neurological signs, posture, signs of neglect (alcohol)
Gait (walk with them in case they fall)
- Sit in chair to stand with arms folded (truncal ataxia)
- Walk away then walk back heel toe if possible (ataxic gait)
Posture
- Stand with feet together
- Romberg’s test (if steady): ask patient to close eyes and assess stability (sensory ataxia)

NOW...work down the body

Face
Face
- H test for extraocular muscle function and pause at lateral gaze (nystagmus; saccades)
- Look from one target to another (hypometric saccades)
Speech
- Say “West register street”, “baby hippopotamus” and “British constitution” (slurring; staccato i.e. jerky speech)
- Tongue: move side to side

Focussed Upper limbs
- Pronator drift: Ask patient to hold arms out fully extended with palms facing upwards and close their eyes (pronator drift = weakness; upward drift = cerebellar lesion).
- Rebound test: while patient’s arms still held up, push patient’s wrists down briskly and then quickly let go (accentuates upward cerebellar drift)
- Hypotonia
- Coordination
  - Finger-nose test (intention tremor and dysmetria)
  - Hand slapping (dysdiadochokinesis)

Focussed Lower limbs
- Hypotonia
- Coordination (heel-shin test)

To complete
- Thank patient and cover them
- “To complete my exam, I would examine fundi for papilloedema (space occupying lesion), perform a full neurological exam and examine CN 5, 7, 8 to exclude cerebellopontine angle lesion”
- Summarise and suggest further investigations you would do after a full history