Progression of Training and Skills
Neurology

Preamble
Neurologic problems comprise about 15% of a family physician's work. Many are marked by slow degeneration, and for some, there is only palliation. Some such as seizure, amyotrophic lateral sclerosis, and Huntington disease may have social stigma attached. The opportunity to practice the neurologic examination should be taken whenever presented, and to correlate imaging findings with abnormal examination. Care may be carried out predominantly by the family physician, or shared with the consultant neurologist, or mainly managed by the neurologist with the family physician providing support.

Goals
• Acknowledgment of the impact of neurological disease on family practice
• Awareness of the importance of diagnosing and treating neurological disease in family medicine practice
• An understanding of the role of treatment, prevention, and support in recurrent or progressive neurologic disease
• Knowledge of multi-system care and support
• Knowledge of appropriate pain management and referral in chronic pain

Objectives
• To be able to take an appropriate focused and comprehensive history (including necessary information from others) and communicate this verbally or in writing and in summary form
• To be able to perform a neurological and mental status examination, Glasgow coma scale and communicate verbally or in writing and in summary form to other providers
• To assess the acuity and prognosis of the clinical problem as it relates to the need for immediate management and the requirement for expert assistance
• Knowledge of indications, contraindications, risks and significance of ancillary tests
  • Lumbar puncture
  • Electroencephalogram
  • Visual, brain stem auditory and somatosensory evoked potential
  • Nerve conduction study and electromyography
  • Muscle and nerve biopsy
  • Advanced imaging techniques (CT, MRI, angiography, carotid ultrasound)
  • Genetic testing
• Manage emergent neurology problems and obtain urgent consultation appropriately
• Develop systematic approach to investigation of headache
• To communicate in compassionate, knowledgeable manner and address complex psychosocial issues in neurology
• To recognize personal practice limitations and seek consultation with as appropriate

The goals and objectives are achieved through a combination of structured experience together with didactic instruction.

[Revised and approved at the Faculty Meeting April 3, 2012]
[Revised and approved at the Faculty Retreat June 20, 2014]
Suggested reading:

Migraine headache

Seizure-1
Seizure-2
Seizure-3

Stroke-1
Stroke-2 (at least pages 38-39)