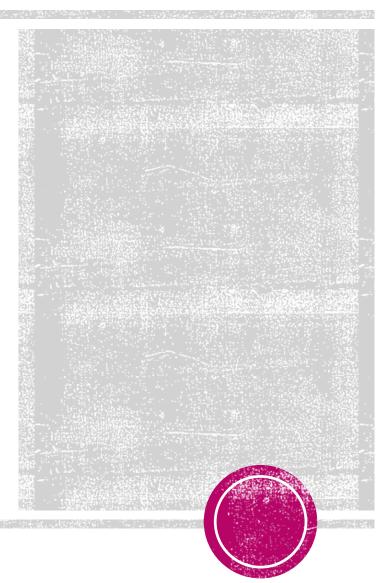
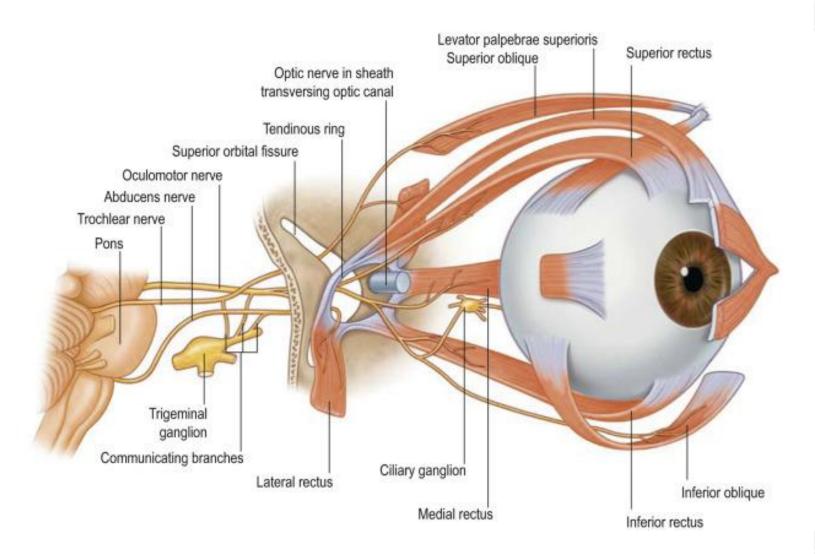
EXAMINATION OF CRANIAL NERVES 3,4,5 AND 6





TO DEMONSTRATE THE CLINICAL TESTS FOR EXAMINATION OF

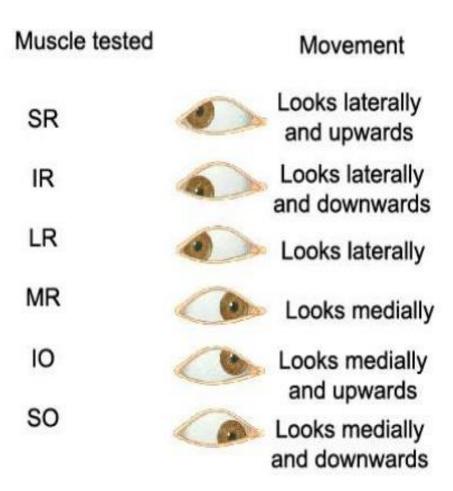
OCULOMOTOR NERVE TROCHLEAR NERVE ABDUCENT NERVE



INTRODUCTION

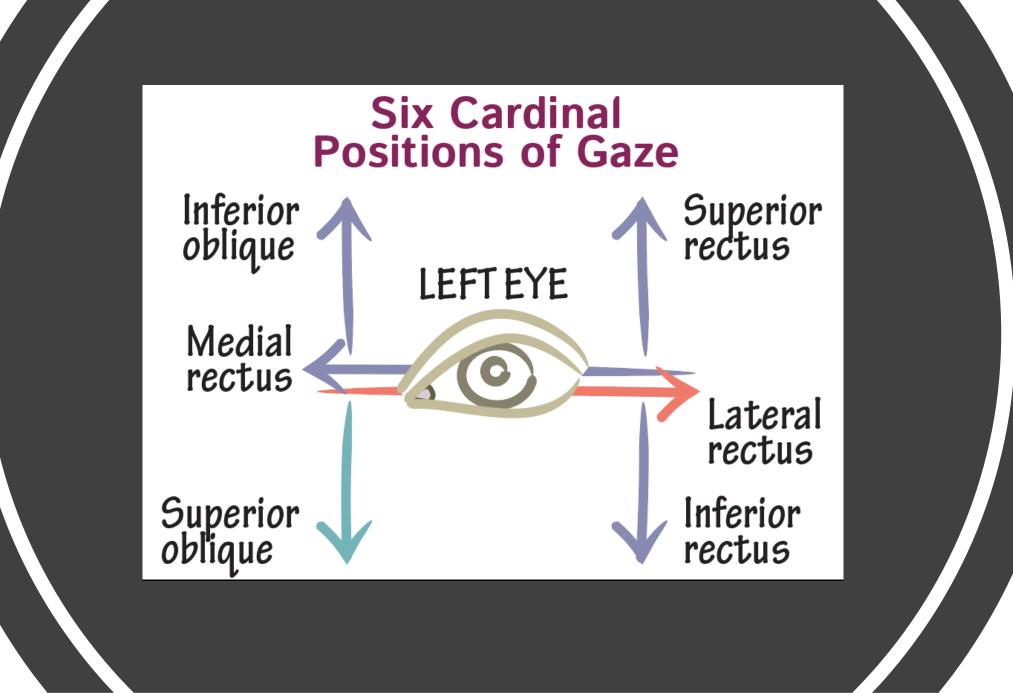
- Third fourth and sixth cranial nerves.
- They are mixed nerves.
- They control ocular movements so considered together.

Clinical Testing



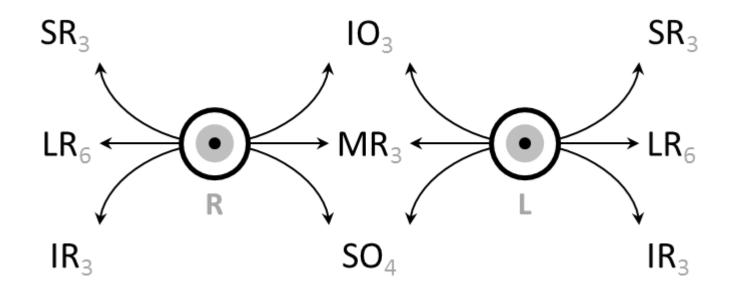
EXTRAOCULAR MUSCLES

- 4 Recti
 - Superior rectus Inferior rectus Medial rectus Lateral rectus
- 2 Oblique
 - Superior oblique
 - Inferior oblique
- 1 Levator palpebrae superioris



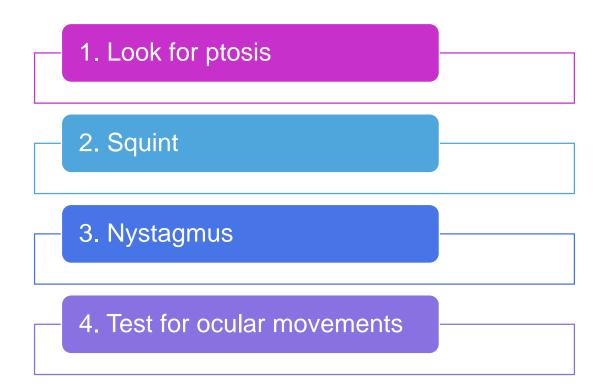
EXTRAOCULAR MUSCLES

- Abducent nerve innervates lateral rectus muscle. (LR6)
- Trochlear nerve innervates superior oblique muscle. (SO4)
- All other extraocular muscles and levator palpebrae superioris supplied by oculomotor nerve.









TEST FOR OCULAR MOVEMENTS

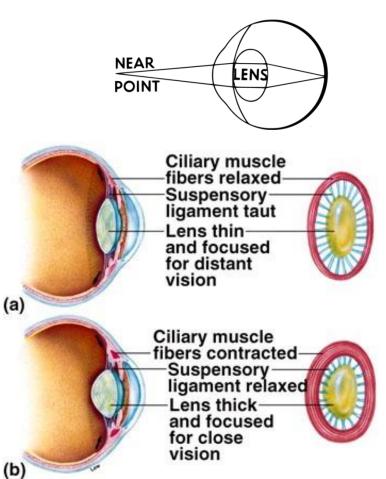
Ask the subject to follow the movements of examiner's finger with his eyes in superior, medial, inferior, lateral and oblique directions.

Stabilize the subject's chin to prevent head movement.

The examiner should observe that the movement of eye balls are smooth. If the full movement occurs, it is indicative that the muscle's strength and nerve function is intact.

EXAMINATION OF THE PUPUL

- Size and shape of pupils in both eyes
- LIGHT REFLEX, both direct and consensual
- ACCOMODATION REFLEX ask the subject to look at a distant object and then at the tip of examiner's finger
- When the eyes are focused from distant to near object, 3 reactions take place
 - constriction of pupils
 - convergence of eyeballs
 - thickening of lens due to contraction of ciliary muscles

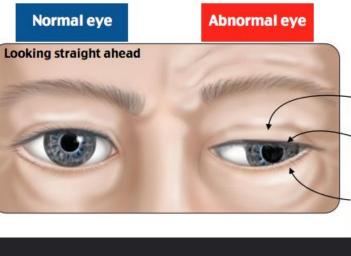




OCULOMOTOR NERVE PALSY

- characteristic down and out position in the affected eye
- Ptosis
- Mydriasis

Oculomotor Nerve (CNIII) Palsy



-Ptosis Inactivation of the levator palpebrae

Mydriasis Decreased tone of the constrictor pupillae muscle

- "Down and Out" Unopposed left superior oblique and lateral rectus muscles



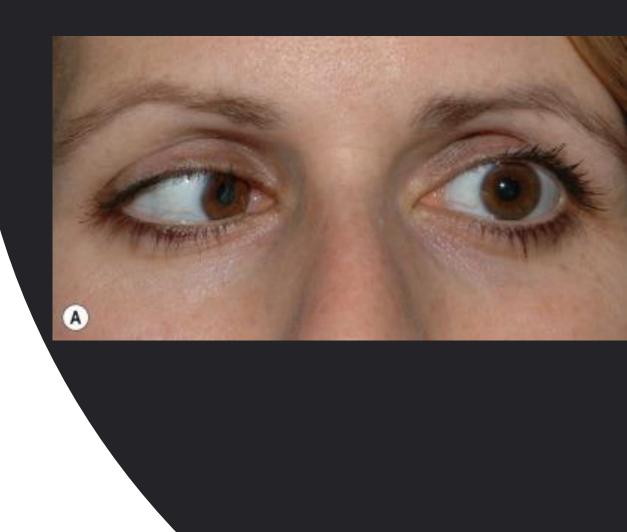
TROCHLEAR NERVE PALSY

affected eye drifts upward



ABDUCENT NERVE PALSY

 Affected eye unable to ABDUCT and is displaced MEDIALLY in primary position of gaze (pulled in toward the nose because the medial rectus muscle works without opposition).



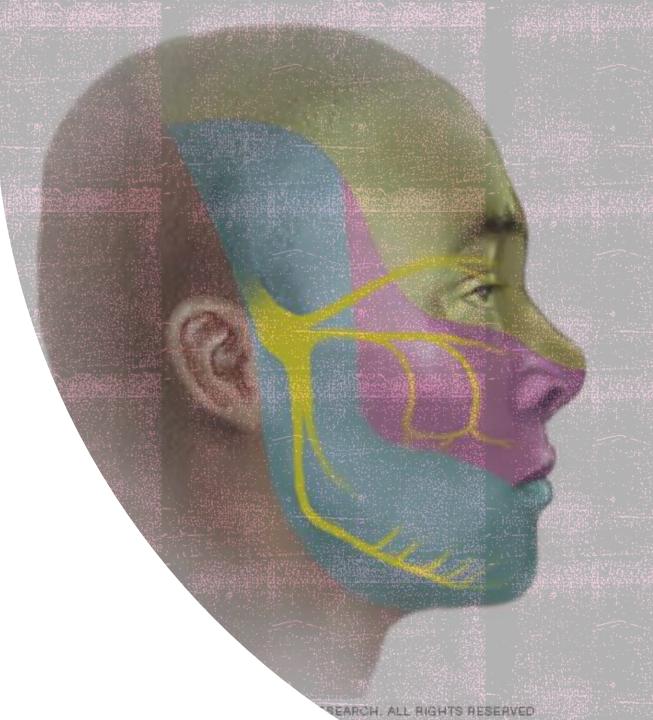
TO DEMONSTRATE THE CLINICAL TESTS FOR EXAMINATION OF

TRIGEMINAL NERVE



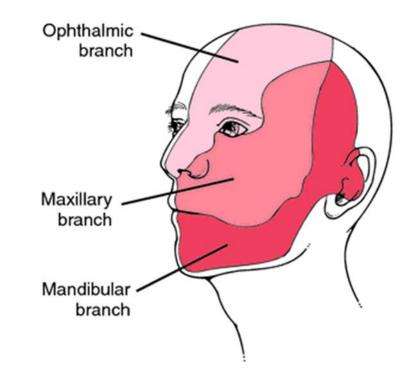
INTRODUCTION

- It is a mixed nerve.
- Originates from 3 sensory nuclei (mesencephalic, principal sensory, spinal nucleus of trigeminal nerve) and 1 motor nucleus (motor nucleus of trigeminal nerve) extending from midbrain to medulla
- At level of pons, sensory nuclei merge to form a sensory root.
- In middle cranial fossa, sensory root expands into trigeminal ganglion, then divides into 3 divisions.
- 1. Ophthalmic
- 2. Maxillary
- 3. Mandibular
- Motor nucleus continues to form motor root, then fibres are passed only in mandibular branch



OPHTHALMIC DIVISION

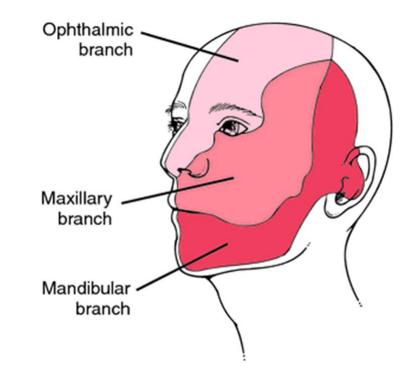
- It supplies the
- skin of upper eyelids
- cornea
- medial part of nose as far as its tip
- forehead and scalp
- Frontal and ethmoid sinus





MAXILLARY DIVISION

- It supplies the
- lower eyelid
- front of the temple, cheek, maxillary sinus
- sides of the nose, nasal cavity
- upper lip, upper teeth
- upper part of pharynx, roof of the mouth
- parts of soft palate and tonsils.



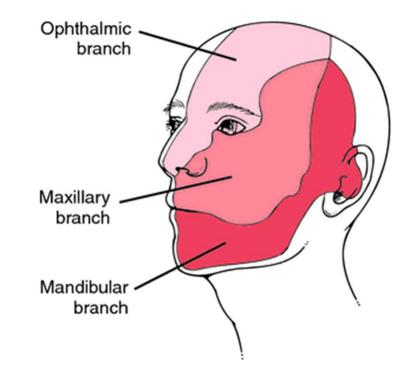


MANDIBULAR DIVISION

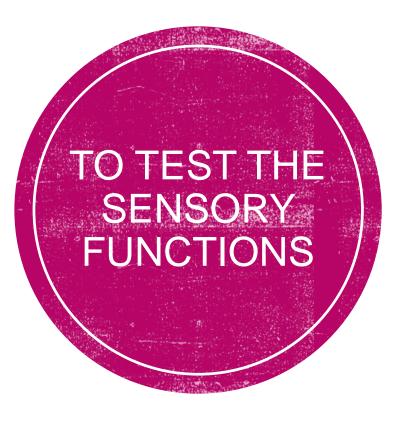
- It supplies
- lower part of face, lower lip
- Ear
- Anterior two third of tongue (only general sensation)
- Lower teeth and salivary glands

- Its motor root supplies all the muscles of mastication except buccinator.
- Muscles of masticaton: masseter, temporalis, medial and lateral pterygoid.

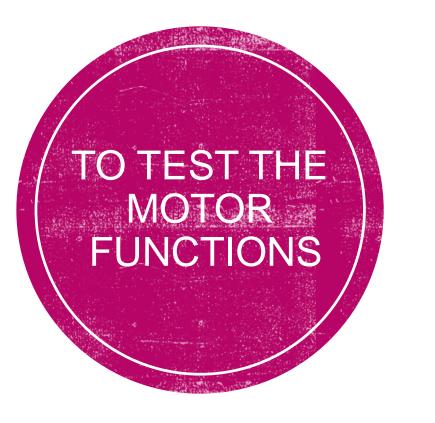
Also supply anterior belly of digastric, mylohyoid, tensor veli palatini, tensor tympani







- Test for various sensations over the skin and mucus membrane supplied by this nerve
- 1. Touch
- 2. Pain
- 3. Pressure
- 4. Temperature
- The subject is asked to close his eyes then his side of the face on the forehead, cheek and chin is touched with a pointer and he is asked whether he can feel the sensation and he should tell whether the stimulus is sharp or dull.
- To test the temperature sense over the face, capped test tubes filled with warm and cold water are used.
- Also test corneal reflex and touch sensation on ant . 2/3 of tongue.

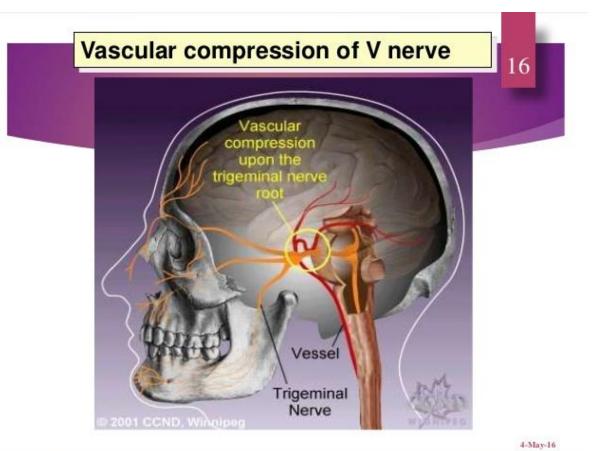


- Inspect the face of the subject.
- Look for any tremors or muscle atrophy.
- Ask the subject to clench his teeth, the temporalis and masseter muscle stand out with equal prominence on each side which can be confirmed on palpation.
- Ask the subject to open the mouth against resistance, checking for the medial and lateral pterygoids
- In case of paralysis the jaw will deviate towards the paralyzed side because of push by healthy external pterygoid muscle on the opposite side.
- Also check jaw jerk reflex.

TRIGEMINAL NEURALGIA

Also called <u>Tic Douloureux</u>

- Chronic pain condition that affects the trigeminal nerve, which carries sensation from your face to your brain
- If you have trigeminal neuralgia, even mild stimulation of your face — such as from brushing your teeth or putting on makeup, chewing or talking — may trigger a jolt of excruciating pain
- Although the exact cause of trigeminal neuralgia is not fully understood, a blood vessel is often found compressing the nerve.





MEDIAL RECTUS MUSCLE IS INNERVATED BY WHICH NERVE

- 1. ABDUCENT NERVE
- 2. OCULOMOTOR NERVE



MEDIAL RECTUS MUSCLE IS INNERVATED BY WHICH NERVE

- 1. ABDUCENT NERVE
- 2. OCULOMOTOR NERVE (CORRECT)



- EAR AND LOWER LIP IS SUPPLIED BY
- 1. MANDIBULAR BRANCH OF TRIGEMINAL NERVE
- 2. MAXILLARY BRANCH OF TRIGEMINAL NERVE



- EAR AND LOWER LIP IS SUPPLIED BY
- 1. MANDIBULAR BRANCH OF TRIGEMINAL NERVE (CORRECT)
- 2. MAXILLARY BRANCH OF TRIGEMINAL NERVE

