

contracted. A common site for testing tone is the biceps muscle of the arm. Children are usually willing to “make a muscle” by clenching their fists.

Estimate strength by having the child use an extremity to push or pull against resistance, as in the following examples:

Arm strength: Child holds the arms outstretched in front of the body and tries to raise the arms while downward pressure is applied.

Hand strength: Child shakes hands with nurse and squeezes one or two fingers of the nurse's hand.

Leg strength: Child sits on a table or chair with the legs dangling and tries to raise the legs while downward pressure is applied.

Note symmetry of strength in the extremities, hands, and fingers, and report evidence of **paresis**, or weakness.

Neurologic Assessment

The assessment of the nervous system is the broadest and most diverse part of the examination process, because every human function, both physical and emotional, is controlled by neurologic impulses. Much of the neurologic examination has already been discussed, such as assessment of behavior, sensory testing, and motor function. The following focuses on a general appraisal of cerebellar function, deep tendon reflexes, and the cranial nerves.

Cerebellar Function

The cerebellum controls balance and coordination. Much of the assessment of cerebellar function is included in observing the child's posture, body movements, gait, and development of fine and gross motor skills. Tests (such as, balancing on one foot and the heel-to-toe walk) assess balance. Test coordination by asking the child to reach for a toy, button clothes, tie shoes, or draw a straight line on a piece of paper (provided the child is old enough to do these activities). Coordination can also be tested by any sequence of rapid, successive movements, such as quickly touching each finger with the thumb of the same hand.