



FIG 27-3 Variations in pupil size with altered states of consciousness. **A**, Ipsilateral pupillary constriction with slight ptosis. **B**, Bilateral small pupils. **C**, Midposition, light fixed to all stimuli. **D**, Bilateral dilated and fixed pupils. **E**, Dilated pupils, left eye abducted with ptosis. **F**, Pinpoint pupils.

The description of eye movements should indicate whether one or both eyes are involved and how the reaction was elicited. The parents should be asked about preexisting strabismus, which will cause the eyes to appear normal under compromise. Posttraumatic strabismus indicates CN VI damage.

Special tests, usually performed by qualified persons, include:

Doll's head maneuver: Elicited by rotating the child's head quickly to one side and then to the other. Conjugate (paired or working together) movement of the eyes in the direction opposite to the head rotation is normal. Absence of this response suggests dysfunction of the brainstem or oculomotor nerve (CN III).

Nursing Alert

Any tests that require head movement are not attempted until after cervical spine injury has been ruled out.

Caloric test, or oculovestibular response: Elicited with the child's head up (head of bed is elevated 30 degrees) by irrigating the