

**CANADIAN
NEUROLOGICAL
SCALE**

Patient Name: _____

Rater Name: _____

Date: _____

Mentation **Score**

Level Consciousness	Alert	3.0
	Drowsy	1.5
Orientation	Oriented	1.0
	Disoriented/NA	0.0
Speech	Normal	1.0
	Expressive Deficit	0.5
	Receptive Deficit	0.0

TOTAL: _____

Section A1 **Motor Functions** **Weakness** **Score**

<i>NO COMPREHENSION DEFICIT</i>	Face	None	0.5
		Present	0.0
	Arm: Proximal	None	1.5
		Mild	1.0
		Significant	0.5
		Total	0
	Arm: Distal	None	1.5
		Mild	1.0
		Significant	0.5
		Total	0
	Leg: Proximal	None	1.5
		Mild	1.0
		Significant	0.5
		Total	0
	Leg: Distal	None	1.5
		Mild	1.0
		Significant	0.5
		Total	0

TOTAL: _____

Section A2	Motor Functions	Weakness	Score
COMPREHENSION DEFICIT	Face	Symmetrical	0.5
		Asymmetrical	0.0
	Arms	Equal	1.5
		Unequal	0.0
	Legs	Equal	1.5
		Unequal	0.0
TOTAL:			_____

References

Cote, R, Hachinski, V. C., Shurvell, B. L., Norris, J. W., and Wolfson, C. "The Canadian Neurological: Scale A preliminary study in acute stroke."

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