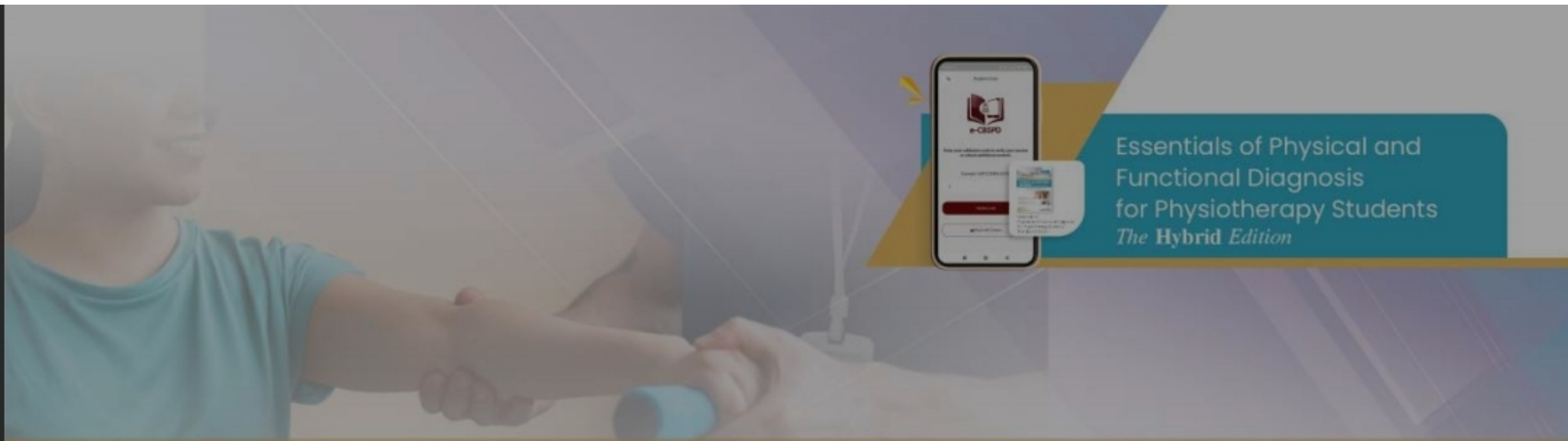



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# PHYSICAL and FUNCTIONAL DIAGNOSIS for Physiotherapy Students

***As per the Physiotherapy Curriculum of the National Commission for Allied and Healthcare Professions (NCAHP)***



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*Editors*
**Anchit Gugnani**
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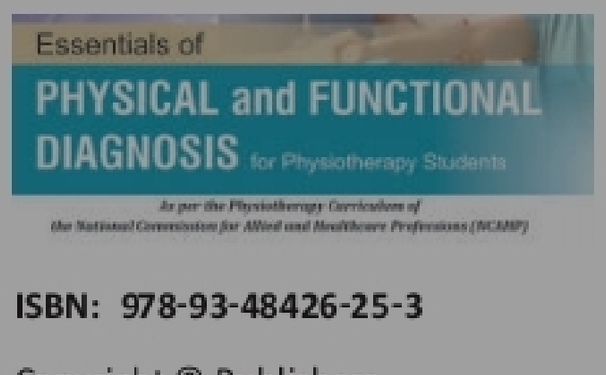
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# 30

# Assessment of Higher Mental Functions



*Aafreen*

## LEARNING OBJECTIVES

*After studying the chapter, readers will be able to:*

- Describe the neurobiology of higher mental functions.
- Discuss the techniques for assessing higher mental functions.
- Explain the domain-specific assessment techniques.
- Interpret the findings of higher mental function assessment.
- Describe the differential diagnosis based on assessment results.
- Explain the clinical relevance of higher mental function assessment.
- Discuss the importance of accurate and comprehensive higher mental function assessment.

## CHAPTER OUTLINE

- Introduction
- Definition
- Neurobiology
- Techniques for Assessment
- Interpretation of Findings
- Clinical Relevance
- Importance of Accurate and Comprehensive Assessment
- Case Studies



# STUDENT ASSIGNMENT

## LONG/SHORT ANSWER QUESTIONS

1. What is the purpose of performing a reflex assessment during a neurological exam?
2. What are the major differences between a normal and an abnormal reflex response?
3. Which common reflexes are assessed in a standard neurological exam?

## MULTIPLE CHOICE QUESTIONS

1. **Which reflex is tested by tapping the patellar tendon?**
   a. Biceps reflex
   b. Achilles reflex
   c. Plantar reflex
   d. Knee-jerk reflex
2. **What does a hyperactive reflex response typically indicate?**
   a. Normal neurological function
   b. Upper motor neuron lesion
   c. Lower motor neuron lesion
   d. Muscular dystrophy
3. **The Babinski sign is observed when:**
   a. The foot dorsiflexes upon stroking the sole.
   b. The toes curl downward upon stroking the sole.
   c. The leg kicks outward when the patella is tapped.
   d. The arm flexes when the biceps tendon is tapped.
4. **Which tool is commonly used for reflex testing?**
   a. Stethoscope
   b. Reflex hammer
   c. Sphygmomanometer
   d. Tuning fork
5. **The absence of the Achilles reflex may indicate:**
   a. Sciatic nerve damage
   b. Damage to the L2-L4 spinal segments
   c. Damage to the S1-S2 spinal segments
   d. Upper motor neuron injury