Sensory and motor complications of neurologic disorders are considered the largest remained subacute or chronic condition of neurologic diseases.

In the new era of medicine, rehabilitation of neurologic diseases, classification, and scaling –disability and impairment- have gained attention.

Finding the motor disturbances and function of the patient and its appropriate scaling by a physiatrist and afterwards planning the rehabilitation program are performed in the first step.

By knowing the pathophysiology of neurologic diseases involving central or peripheral problems the rehabilitation team begins the proper rehabilitation for attaining functional independence.

The rehabilitation team containing physiatrists, physiotherapists, work trainers, speech trainers, and rehabilitation nurses hand in hand try for returning patient to the independent life.

Principles of rehabilitation of neurologic injuries will be designed based on correcting the motor activity and helping reducing independence of the patient and considers neurologic complications like disturbances of swallowing, speech, motor activity, and urinary or fecal incontinence.

In this regard, multiple subspecialties like experts in rehabilitation in swallowing disorders, rehabilitation in bladder dysfunction, management of spasticity and evaluation of sexual disorders and their rehabilitation, also improving social activity, establishment of social and familial relationships are invited.