Theoretical part of this thesis concerns Pharmacoresistant Temporal Lobe Epilepsy and Epilepsy surgery as an important option of the treatment of these patients. It introduces respective methods used in complex preoperative diagnostics stressing the neuropsychological preoperative examination. Majority of basic cognitive functions - memory, speech and IQ - are lateralised. Functionality of temporal lobe is reflected by ability of naming. We introduce the Boston Naming Test (BNT) used in preoperative diagnostics of pharmacoresistant epilepsy patients to locate the epileptogenic region. Empirical part concerns Czech adaptation and standardisation of BNT and describes pivotal study with 38 healthy persons and 38 patients with temporal lobe epilepsy. Main objective was to check criterial validity of BNT. Statistical analysis shows highly significant differences between scores of healthy controls and epilepsy patients. (p < 0.000). Test shows 80% sensitivity and 92% specificity.