Description of Balance Tests

Your physician has referred you to the Balance Center to test your balance system. You will be scheduled for one or all of the following tests, depending on your specific symptoms. The balance system itself is made up of three components:

- 1. Your inner ear (vestibular)
- **2.** Eyes (visual)
- **3.** Muscular/feet on the floor (proprioceptive)

There is a muscular reflex between your vestibular and visual system, and for two of the tests you will be wearing goggles which record your eye movements. We are not testing your vision, just measuring the muscle reflex. This helps us measure the response to the inner ear stimulation.

Balance Center Tests:

Posturography (muscular/feet on the floor)

During this 30-minute test you will wear a harness for security while standing on a platform that moves. The movement is small, just enough to see how you are using your leg muscles to help balance yourself. At times you will be asked to close your eyes.

Rotary Chair (inner ear/eyes)

The rotary chair test takes a total of 45 minutes. Your eye movements are recorded as you sit in a darkened room in a chair that slowly rotates back and forth. It does not continually spin in one direction and it is <u>not</u> moving quickly. During the final portion of this test you will look at some moving stripes. Throughout this testing the Audiologist will ask you simple questions or have you name things. This is designed just to keep you alert during the testing.

ENG(inner ear/eyes)

The electronystagmogram (ENG) test takes approximately 1 to 1 ½ hours. Eye movements are recorded during a series of tasks that stimulate the inner ear and eyes. These include watching a moving light and assuming various head and body positions. The last portion of the test is the <u>caloric stimulation</u>. During this portion of the test the audiologist places a small balloon (about the size of an earplug) into the EXTERNAL ear canal. The balloon fills with warm and cool water to stimulate the balance system. The <u>water does not enter the ear directly.</u> This stimulation <u>may or may not</u> cause a temporary sensation of movement.