

OCEAN EMPIRE DIAGNOSTIC

NAME: John Doe

AGE: 45 years

REFERRED BY: Dr. Spadafora

DATE OF VNG: 7-3-11

VIDEONYSTAGMOGRAPHY

Tracking/Smooth Pursuit, Saccade, Optokinetic, Gaze Testing, Spontaneous Gaze, Torsion Swing, Active Head Rotation, Positional Test, Dix/Hallpike Test, Caloric Results Test.

Oculomotor Studies

Tracking/Smooth Pursuit: The patient elicited a decreased gain of 62% with a phase of 15.

Saccade: The patient elicited a peak velocity of 280 deg/sec with a latency of 233 ms. These values are normal.

Optokinetic: The patient elicited 13L deg/sec rightward and 12R deg/sec leftward. These values are normal.

Gaze Testing: This is a normal study.

Spontaneous Gaze: No significant nystagmus was elicited.

Torsion Swing: Torsion swing adequately suppresses with fixation.

Active Head Rotation

This test was not performed.

Positional Test

Normative values for positional tests are 0-3 deg/sec horizontal slow component velocity for all positions. These values are normal.

Dix/Hallpike Test

Normative values for Dix/Hallpike tests are less than or equal to 3 deg/sec slow component velocity both horizontally and vertically. These values are normal.

Caloric Results Test

Normative values for caloric testing are a combined slow component velocity from all 4 tests of greater than or equal to 20 deg/sec with a unilateral weakness of less than or equal to 25%. There is evidence of right and left ear weakness to bithermal air irrigation.


IMPRESSION

Peripheral: These results indicate bilateral peripheral vestibular lesions involving the lateral semicircular canals or their afferent pathways based on the abnormalities seen during bithermal caloric testing.

Central: These results indicate central vestibular dysfunction based on the abnormalities seen during oculomotor testing.

RECOMMENDATIONS

Balance rehabilitation is indicated, including log roll canalith repositioning maneuvers targeting the right and left lateral semicircular canals. An MRI of the brain with and without contrast may be indicated to further assess the central nervous system based on the abnormalities seen during this study. Clinical correlation is recommended.



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