

## Vestibular Screening

### 1. Any complaints of dizziness and/or imbalance:

Yes - how long have they had symptoms, how long do they last and triggers

### 2. New hearing loss :

If yes ask medical team to check ear for blockage/blood. If normal or loss of hearing persists after ear canal cleared then refer to audiology

**Please be aware of vestibular agnosia in the TBI population – as a result of this they may not report dizziness or imbalance symptoms.**

### 3. Headaches:

If yes

- are they pre-existing/migraines?
- Ask medical team to prescribe TBI headache management

**Depending on severity of headache stop screen and complete at a later date once headache has settled.**

### 4. Blood pressure:

- lying:

-sitting:

-standing:

### 5. Balance/gait assessment

Unable to maintain balance in any of the following procedures

- Rombergs Test (eyes closed, feet together):
- Tandem Walking
- Tandem Stance

### 6. Positional Tests:

These test look for BPPV (Benign Paroxysmal Positional Vertigo)

- Posterior canal – Dix Hallpike test left and right
- Posterior canal adaptation – side lying test left and right - (this is useful for patients who will not tolerate dix hallpike position)
- Horizontal canal – roll test left and right.

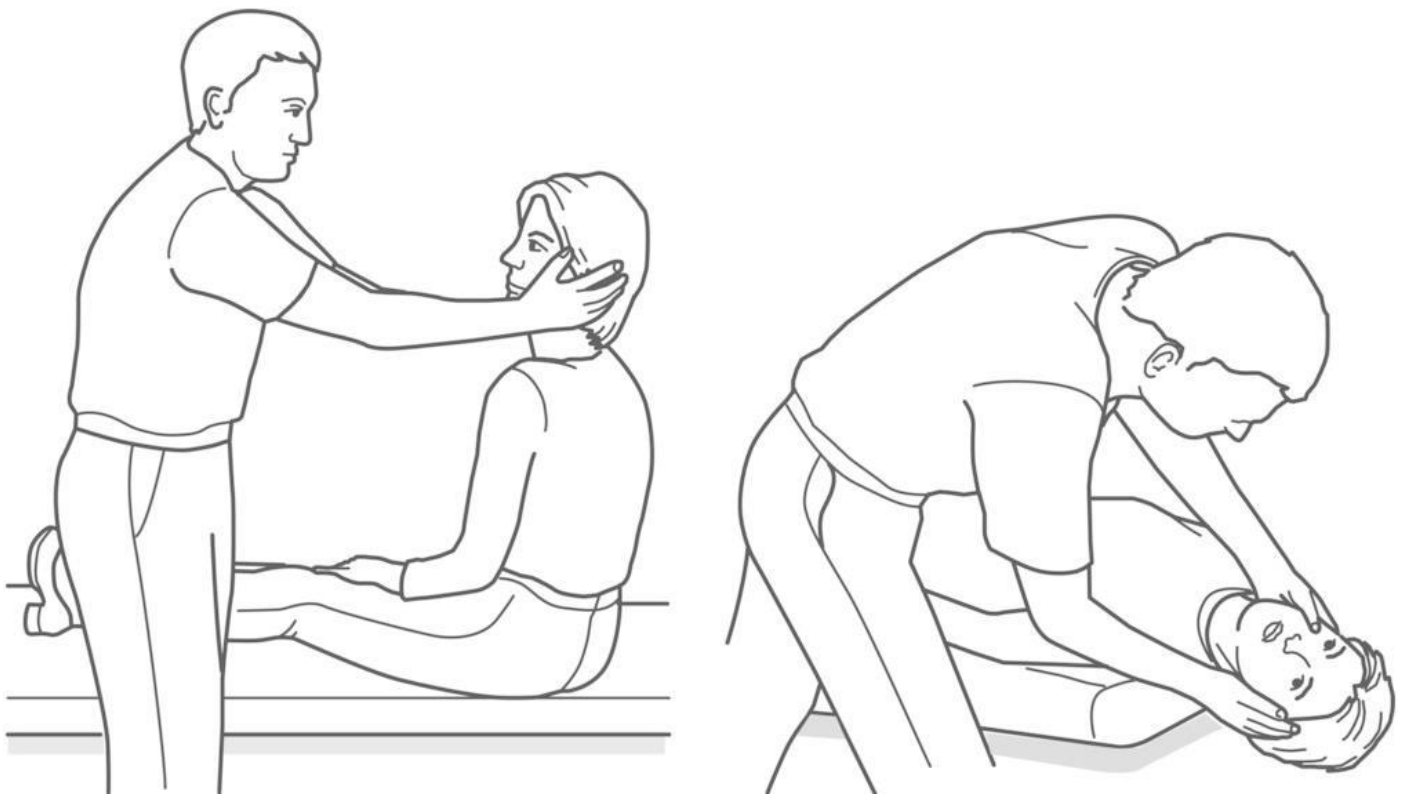
### 7. Treatment:

If positive then complete appropriate treatment

- Epley for posterior canal
- Semont for posterior canal - (this is useful for patients who will not tolerate Epley positioning. Easier to complete with two therapists)
- BBQ roll for horizontal canal

**If symptoms are not resolved, you are unable to treat or the diagnosis is not clear from above testing then refer to neuro-otology/audio-vestibular for further investigations.**

Dix Hallpike



Roll test

