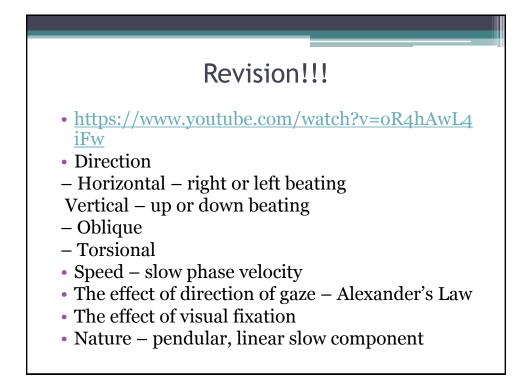
Practical examination Amal Abu Kteish

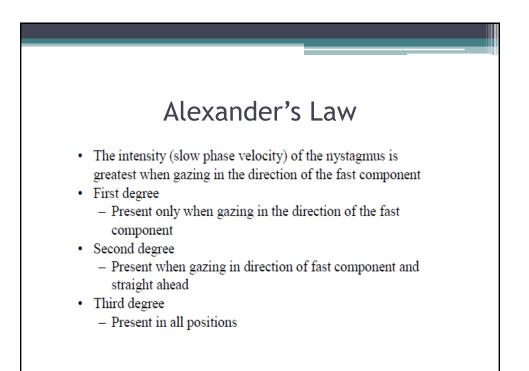


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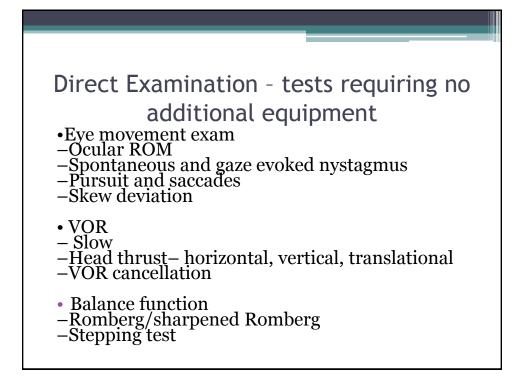
Peripheral vs central nystagmus Acute Acute or chronic • Direction fixed Direction fixed or changing · Follows Alexander's · Enhanced with visual Law

- · Enhanced without visual fixation
- · Linear slow component
- fixation
- Decreasing speed of slow component



Vestibular Nystagmus following Alexander's law

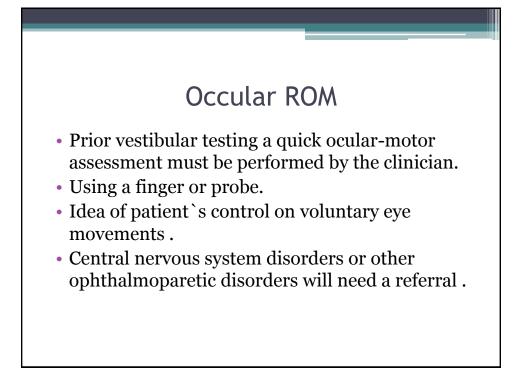
<u>https://www.youtube.com/watch?v=mghGeKkN</u>
<u>BzQ</u>



Eye movement exam

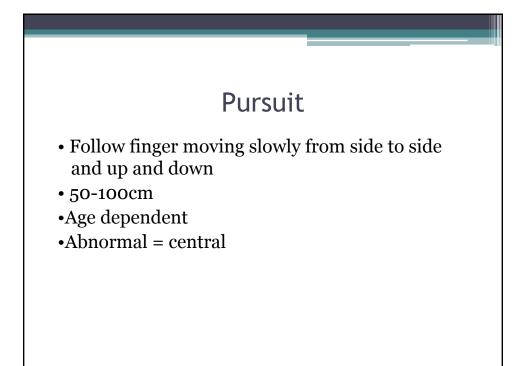
•Ocular ROM

- Looking at function of cranial nerves III, IV and VI
- Look for conjugate eye movement and restrictions in one or both eyes
- •Spontaneous and gaze evoked nystagmus
- Pause for 10-15 secs right left up and down
- Note the presence, direction and nature of any nystagmus
- Pursuit
- Is it smooth in all directions?
- Saccades
- Is the eye movement conjugate?
- Consider velocity and accuracy

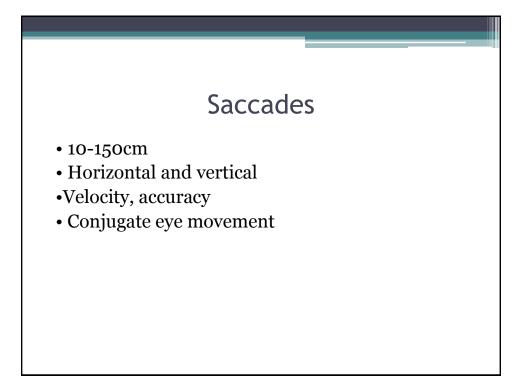


Occular ROM

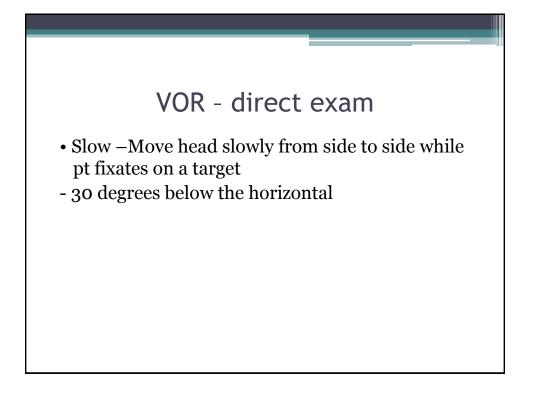
- <u>https://www.youtube.com/watch?v=tQTof1AVN</u> <u>mA</u>
- <u>https://www.youtube.com/watch?v=gxyZxASGx</u> <u>ck</u>
- <u>https://www.youtube.com/watch?v=D-wP29938as</u>

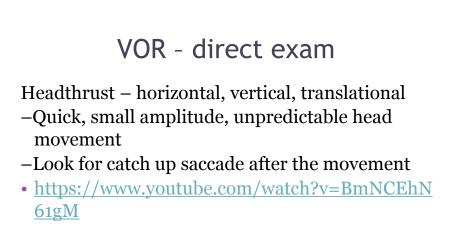




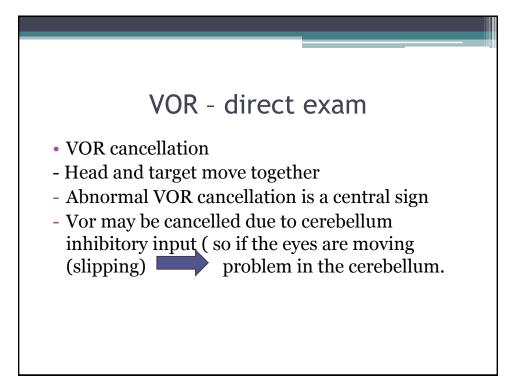


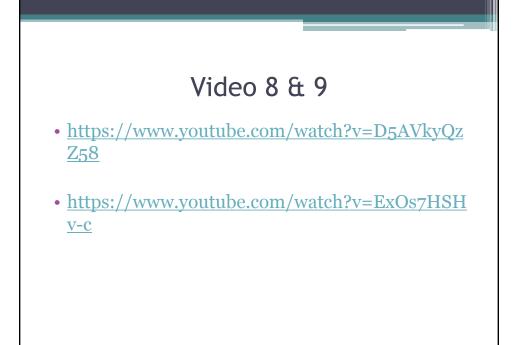


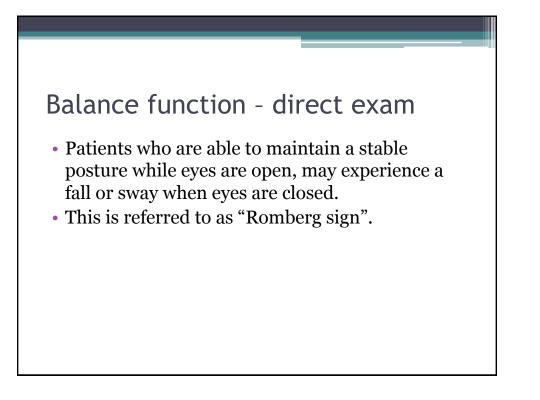


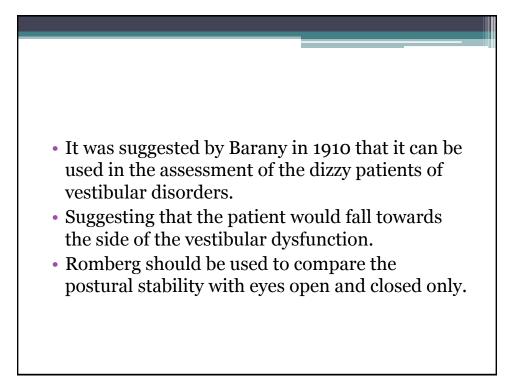


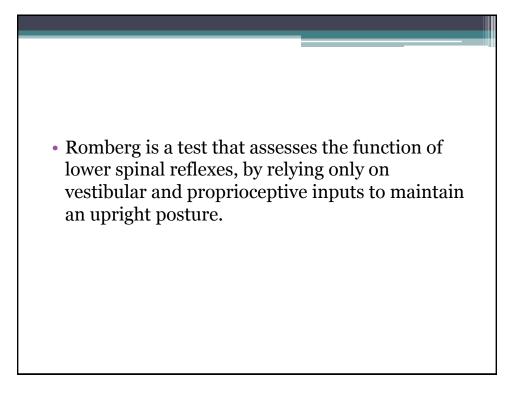
 <u>https://www.youtube.com/watch?v=KYI7eHhw</u> <u>hwk</u>

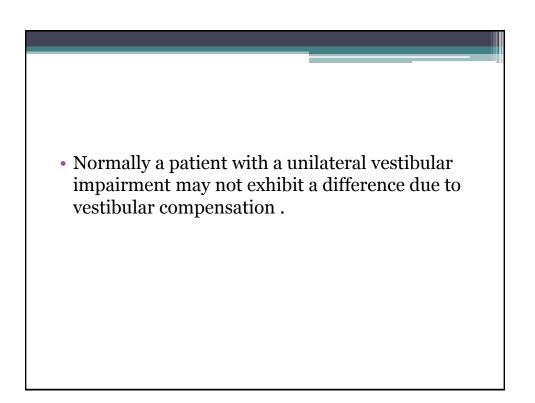


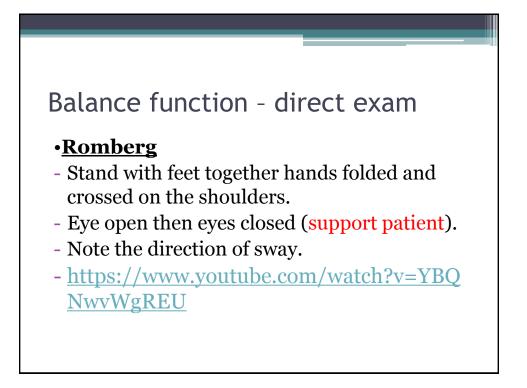










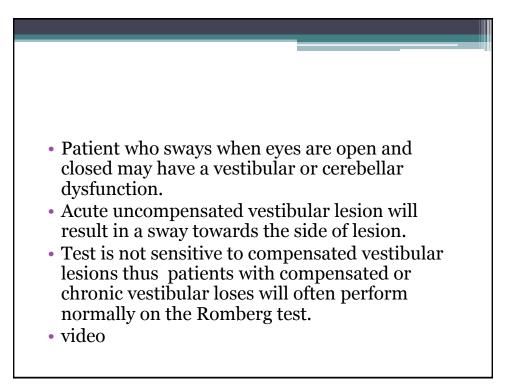


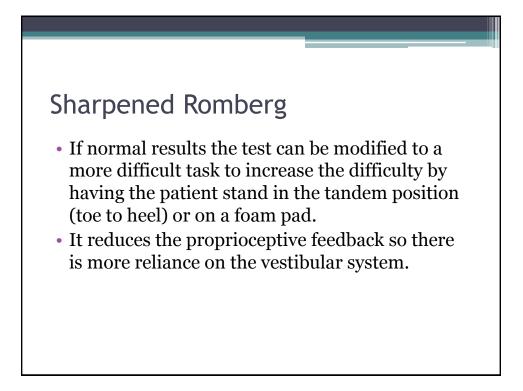
Normal

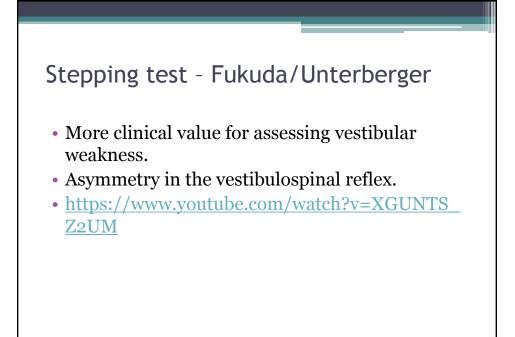
• Maintain in standing position with eyes closed for 30 secs (without falling or swaying).

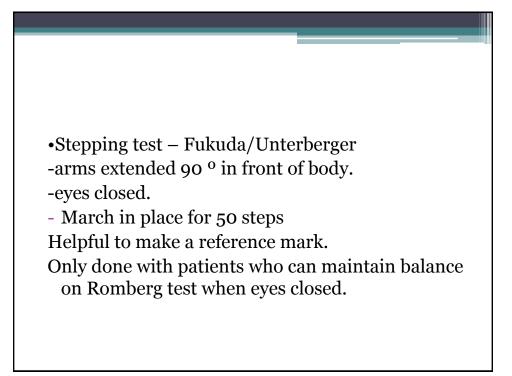
Abnormal (positive)results

- Fall or sway when eyes closed.
- If the move their legs from original position or hands from shoulders.









Normal results

- Normal patients can perform the 50 steps without a significant deviation (no more than 50 cm).
- Its also normal to rotate in the direction of the dominant hand and forward not backwards (non organic dysequilibrium).

Abnormal results

- A rotation of more than 45 ° in either direction.
- Fall or sway.
- As it was originally described, patients with significant unilateral vestibular impairment would have a tendency to deviate (rotating greater than 45 degrees) in the direction of the affected labyrinth.
- However some suggest its pathology related.
- Do not use in isolation.