



Name: TEST NAME  
Age: 42  
Gender: M  
Date: 08/02/2010

Patient ID: E0003  
SSN:  
Chart No:

**Description**

The Vestibular Autorotation Test (VAT®) is a clinical test of the high frequency horizontal and vertical vestibulo-ocular reflex (VOR). The primary function of the VOR is to stabilize the eyes to allow clear vision during motion, including normal daily life activities such as walking, bending and turning. The sensation of dysequilibrium or dizziness can occur if the VOR does not function properly. During the VAT® test, the patient is asked to move his head side to side or up and down to a computer generated tone. Electrodes record eye movements and two micro sensors record the head motion. The first portion of the test evaluates the smooth pursuit system. The second portion of the test measures the responses of the inner ear (gain, phase and asymmetry). A minimum of three tests are performed. Abnormal results are reported when the patient's data values fall above or below two standard deviations of the normative data range. Tests from 2-6 Hz, are a test of the peripheral vestibular system.

**Vestibular Autorotation Test (VAT®) Results**

<b>Horizontal Gain:</b>	<i>High</i>	<b>Vertical Gain:</b>	<i>Low</i>
<b>Horizontal Phase:</b>	<i>Low</i>	<b>Vertical Phase:</b>	<i>WNL</i>
<b>Asymmetry:</b>		<b>Saccades:</b>	

**Data Interpretation**

*The high horizontal gain in this patient implies that the VOR overcompensates during head motion. This could cause a visual-vestibular disturbance with faster movements. The low vertical gain in this patient implies that the VOR undercompensates during head motion. This could cause a visual-vestibular disturbance with faster movements. A VAT® horizontal phase lower on the graph relative to the normal range (reaction time of the eye movements in response to the head movements) indicates that the VOR responds too slowly to keep the eyes on target. The patient will experience oscillopsia (movement of the visual field) during faster movements. Vertical phase is within normal limits.*

**Recommendation & Comments**

1. A high horizontal gain and phase is often seen in patients with head trauma. In our experience these patients do well in vestibular rehabilitation with particular emphasis on visual and proprioceptive strategies as well as VOR retraining.  
Corneo-Retinal Potential - Vertical 3.75  
Corneo-Retinal Potential - Horizontal 4.25

**Signature:** \_\_\_\_\_ ; **Referring Physician:**