

# VNG/ENG PRE-TEST INSTRUCTIONS

## HEARING CENTER INC. COMMUNITY HOSPITAL EAST

This test is designed to help locate the source of dizziness or balance disorders. You will either wear video goggles or have electrodes taped to your face to measure eye movements. The test consists of three parts. First, you will be asked to watch a series of lights on a light bar. Next, you will be asked to lie in different positions. Finally, your ears will be irrigated with warm and cool water to measure back and forth eye movements called nystagmus. Your ears will need to be free of wax. The test will take approximately 1 to 1 ½ hours. ***Due to the amount of time scheduled for this test, please notify us prior to your test date if you are unable to keep your appointment. Failure to notify will result in a "no show" fee of \$50. These tests are not painful. However, you may feel dizzy after the test, so we suggest that you arrange for someone to drive you home after the testing is completed.***

### **PLEASE READ CAREFULLY:**

Certain medications may change the findings of the VNG/ENG. Please **avoid** these substances for the stated amount of time before your appointment:

#### **72 Hours:**

- Sleeping pills, tranquilizers, anti-dizzy medications (Antivert, Meclizine, etc.), pain medication or narcotics, muscle relaxers, or medications which contain any of the above.

#### **48 Hours:**

- Alcoholic beverages, non-essential medications, antihistamines and over-the-counter cold or allergy medications.

Please **CONTINUE** with medications for your heart, blood pressure, diabetes, thyroid, seizures or any other life-sustaining medications. You may also continue to take hormones and Tylenol.

### **ALSO:**

- **Do not** eat or drink anything for a period of three (3) hours before the time of the test.
- **Do not** have any substance with caffeine (coffee, cola, tea, chocolate, etc) or use any tobacco products on the day of the test.
- **Do not** wear any mascara, foundation or face cream the day of the test.

If you have any questions or are unsure about a medication you are taking, please consult your physician or contact us at 355-5049. If **ANY** of the above instructions are not followed, your test will be rescheduled.

### **YOUR VNG/ENG HAS BEEN SCHEDULED FOR: \_\_\_\_\_**

**Please come directly to the Audiology Department at Community Hospital East. You DO NOT need to register at the hospital's Outpatient Registration Desk. We will register you in the Audiology Department. Please arrive about 15 minutes early to fill out the necessary paperwork and be sure to bring your insurance card(s) with you. Thank you.**