



inVision™



Components:

- inVision™ system software
- IBM compatible computer
- Flat panel LCD monitor
- Color printer
- Wireless mouse
- System cart
- InterSense InertiaCube², 3-axis, integrating gyro mounted on a headband
- Flexible patient cable

Physical Dimensions:

	in	cm
System cart	25 x 24 x 44-57*	64 x 61 x 112-145*
*Minimum-maximum monitor extension height.		
Minimum footprint required	36 x 60	92 x 153
Total system weight	142 lbs.	64 kg.

Electrical Characteristics:

- 100-240 volt / 50-60 Hz / 500 Watt
- Conforms to UL STD 2601-1
- Certified to CAN/CSA STD C22.2 No. 601.1
- Compliant to CE standards



Options:

- Laptop configuration
- Also available on other NeuroCom systems

Specifications subject to change without notice.



inVision™

The *inVision* system from NeuroCom® quantifies a patient's ability to maintain visual acuity and stable gaze while actively moving the head. The *inVision* system includes:

- **DYNAMIC VISUAL ACUITY (DVA) TEST**
Quantifies the impact of vestibular ocular reflex (VOR) system impairment on a patient's ability to perceive objects accurately while moving the head at a given velocity on a given axis.
- **GAZE STABILIZATION TEST (GST)**
Quantifies the range of head movement velocities on a given axis over which a patient is able to maintain an acceptable level of visual acuity.

Effective image stabilization during head movement (at velocities up to 120° per second), is a key factor in performing activities of daily living. This process can be severely impacted by vestibular deficits with the ability to stabilize gaze and maintain visual acuity decreasing as the severity of a vestibular deficit increases. Image stabilization deficits are usually greater when a patient is moving the head toward the more severely impaired ear, particularly in the presence of a unilateral peripheral loss. Thus, the assessment of a patient's ability to perform visual tasks requiring image stabilization are considered complementary to physiological tests of the VOR system.

DYNAMIC VISUAL ACUITY (DVA) TEST

- Quantifies the extent of visual acuity loss due to the combined influences of underlying vestibular pathology and adaptive responses on image stabilization.
- Provides information relative to the probable side of lesion in a patient with a suspected unilateral peripheral vestibular deficit. An approach complementary to nystagmography.
- Helps clinicians identify those patients most likely to benefit from vestibular rehabilitation and to focus rehabilitation exercises accordingly.
- As a direct indication of impairment, the DVA is an excellent objective measure of the outcome of vestibular rehabilitation.

GAZE STABILIZATION TEST (GST)

- Provides impairment information specific to the direction and velocity of head movements impacting gaze stabilization.
- Quantifies the velocity range over which VOR compensation is effective for a given head movement.
- Helps target treatment by demonstrating the specific direction(s) and velocity of head movements most likely to achieve the maximum benefit.
- Aids in determining disability ratings by comparing the head movements over which gaze stabilization can be maintained relative to movements required by the daily life task.