Intermountain® Healthcare

Tilt Table Test

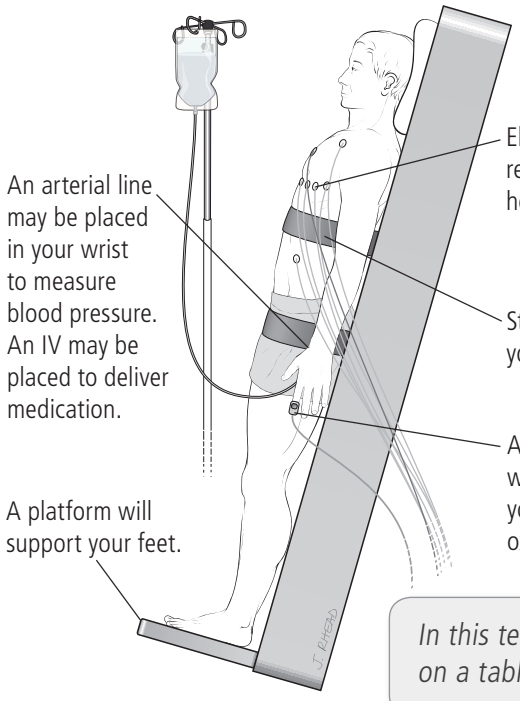
What is a tilt table test?

A **tilt table test** measures changes in your heart rate and blood pressure as you move from lying down to standing up. It's a good way to evaluate fainting (also called **syncope**) or severe dizzy spells.

Why do I need this test?

Your doctor may recommend a tilt table test if you have had spells of fainting or dizziness, and the cause isn't clear. The tilt table test can reveal whether the cause is by **neurally mediated syncope (NMS)**. NMS is fainting or dizziness caused by a problem with your central nervous system.

- **Normal:** When you stand, gravity causes your blood to pool in your legs. This reduces the blood returned to your heart. Normally, your nervous system responds by increasing your heart rate and blood pressure, so your heart and brain get the blood they need.
- **With NMS:** With NMS, your central nervous system sometimes fails to adjust, so your brain doesn't get the blood it needs and you feel dizzy or you faint.



In this test you will lie on a table that tilts up.

Talking with your healthcare providers about the tilt table test

The table below lists the most common potential benefits, risks, and alternatives for this test. Other benefits and risks may apply in your unique medical situation. Talking with your healthcare providers is the most important part of learning about these risks and benefits. If you have questions, be sure to ask.

How do I prepare for the test?

Your doctor will give you directions on what to do before the test. Here are some basic ways to prepare:

- **Tell your doctor about all medications** you take, including over-the-counter drugs and herbal supplements. You may need to avoid some medications before the test.

Potential benefits	Risks and potential complications	Alternatives
If your symptoms are caused by NMS, the test can reveal this so the problem can be treated. Or, it can help to rule out NMS, so your doctor can look for another cause of your fainting or dizziness.	The tilt table test is generally very safe. Risks and potential complications include: • Fainting (this gives your doctor important information about what is wrong). • Nervousness, nausea, or pounding/racing heart. • Blood pressure changes or abnormal heart rhythm that continues after the test. Call your doctor so this can be treated. • Bleeding, blood clots, or infection if an arterial line was inserted. Call your doctor if symptoms occur (see page 2).	Alternatives to the tilt table test include heart monitors that you wear or are implanted for a period of time. These can include: • Holter monitor • Cardiac event recorder • Implantable loop recorder

- **Avoid all stimulants for 24 hours** before the test. That means no coffee, tea, caffeinated soft drinks, energy drinks, chocolate, or drugs with a stimulant effect (such as some herbs or diet pills).
- **Don't eat or drink for several hours** before the test. If you have diabetes, your doctor will tell you what to do.
- **Arrange for a ride** home and wear comfortable clothes to the test.

What happens before the test?

Here's what happens before the tilt table test:

- Family or friends who arrived with you will stay in the waiting room. For this test, having others in the room with you can create false results.
- You'll remove clothing above the waist and put on a gown. A healthcare provider may place an IV line in your arm or wrist to deliver medication.

What happens during the test?

The tilt table test usually takes about one to two hours. Here's what happens during the test:

- **Monitoring.** A healthcare provider will attach devices to monitor you during the test:
  - A finger clip will be attached to measure your blood oxygen.
  - A healthcare provider may insert an **arterial line.** This is a special IV line, placed in an artery, that constantly measures your blood pressure. It is usually placed in your wrist. You'll have anesthetic to numb the area before it is inserted.
  - Several sticky electrode patches will be placed on your chest, connected to equipment that monitors your heart activity.
- **Getting set up on the table.** In the exam room, you'll lie on a table with a platform for your feet. You'll be attached to the table with safety straps along your chest and legs.
- **Tilting the table.** The table will tilt until you are almost in an upright position, and your healthcare providers will take measurements of your blood pressure and heart activity. They may tilt and lower the table more than once during the test.
  - **What you'll feel:** You may feel nothing. But if you have NMS, you may feel dizzy or nauseated. Tell your healthcare providers about your symptoms. You may faint. If this happens, the team will lower the table right away.
- **Using medication.** As part of the test, you may be given medication through the IV or medication under your tongue.
  - **What you'll feel:** You may feel nervous, or your heart may beat faster or harder. These feelings will go away as the medication wears off.

What happens after the test?

- The sticky patches, finger clip, arterial line, and IV line will be removed.
- You can go home the same day. Have someone else drive you home.
- For 12 hours, do not lift anything with the arm where the arterial line was placed.
- Make a follow-up appointment with your doctor to talk about the test. Depending on the results, your doctor may set up further testing or prescribe new medications.

When should I call the doctor?

Call your doctor after the test if:

- You have new symptoms of dizziness.
- You continue to faint, especially if it gets worse.
- You feel nervous or nauseated, and it gets worse.
- Your heart pounds or races.
- You have bleeding or pain at the IV or arterial line site. You have swelling, redness, warmth, or numbness at the arterial line site.

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