

Tilt Table Test

What is a tilt table test?

A tilt table test is a good way to evaluate:

- Heart rate and blood pressure changes as you move from lying down to standing up
- Fainting also called syncope (SIN-cope) or severe dizzy spells

Why do I need this test?

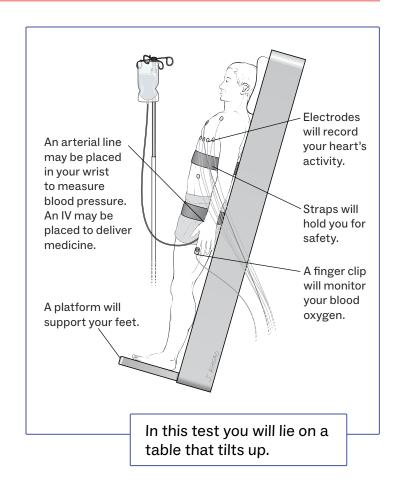
Your doctor may recommend a tilt table test if you have had spells of fainting or dizziness, and the cause isn't clear. The tilt table test can reveal whether or not the cause is **neurally mediated syncope** (NMS) — fainting or dizziness caused by a central nervous system problem. Here's how normal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

- Normal: When you stand, gravity causes your blood to pool in your legs, which 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: Your central nervous system sometimes fails to adjust, so your brain doesn't get the blood it needs, and you either feel dizzy or faint.

How do I prepare for the test?

Your doctor will give you directions on what to do before the test such as:

- Listing all medicines you take including overthe-counter drugs and herbal supplements.
 You may need to avoid some medicines before the test.
- Avoiding 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).



- Not eating or drinking for several hours before the test. If you have diabetes, your doctor will tell you what to do.
- Arranging for a ride home and wearing comfortable clothes to the test.

What happens before the 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 medicine.

What happens during the test?

The tilt table test usually takes about 1 to 2 hours. Here's what happens during the test:

- Monitoring. A healthcare provider will attach devices to monitor you during the test including:
 - A finger clip to measure your blood oxygen.
 - Possibly an arterial line, which is a special IV placed in an artery (usually in the wrist) that constantly measures your blood pressure. If you have this, you'll have anesthetic to numb the area before the line is inserted.
 - Several sticky electrode patches placed on your chest and 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 measure your blood pressure and heart activity. They may tilt and lower the table more than once during the test. You may feel nothing, but if you have NMS, you may feel dizzy or nauseated. Tell your healthcare providers about your symptoms. If you faint, the team will lower the table right away.
- Using medicine. As part of the test, you may be given medicine through the IV or medicine under your tongue. You may feel nervous, or your heart may beat faster or harder. These feelings will go away as the medicine wears off.

What happens after the test?

When the test is complete, a technician will remove the sticky patches, finger clip, arterial line, and IV line. You can go home the same day, but make sure to have someone else drive you home.

For 12 hours after you go home, 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 medicines.

When should I call the doctor?

Call your doctor after the test if you:

- · Have new symptoms of dizziness.
- · Continue to faint, especially if it gets worse.
- Feel nervous or nauseated and it gets worse.
- Feel like your heart is pounding or racing.
- Have bleeding or pain where the technician placed the IV or arterial line.
- Have swelling, redness, warmth, or numbness at the arterial line site.

What are the benefits and risks?

The table below lists the most common potential benefits, risks, and alternatives for this test. Talk to your doctor about other benefits and risks that may apply to your unique medical situation. If you have questions, be sure to ask.

Possible benefits

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.

Risks and possible complications

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 to treat this.
- Bleeding, blood clots, or infection if an arterial line was inserted. Call your doctor if symptoms occur (see above).

Alternatives

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

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