



# Physician's Quick Guide

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**Bertec's authorized representative in the European Community regarding CE:**

**MIE Medical Research Ltd.**

**6 Wortley Moor Road, Leeds LS124 JF, United Kingdom**

**Phone: +44-113-279-3710, Fax: +44-113-231-0820**

**CE**

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## INTRODUCTION

The Quick Reference Guide is not intended to replace the Bertec Workbook manual and should not be used as such.

The Bertec Workbook manual should be your primary source of information.

This Quick Reference Guide is merely a reference guide with supplementary information.

If you have questions that are not addressed in the manual or guide, please contact our service department.

Phone: +1 614 430-5421

Email: [service@bertec.com](mailto:service@bertec.com)

## SYSTEM SETUP



**Reminder:** This is only a reference guide. For complete installation directions, please read the Installation and System Setup chapter in the Bertec Workbook manual. Be sure to follow all safety guidelines and recommendations as listed in the manual. Failure to do so may result in harm to the patient and/or the equipment.

This reference guide is intended for use with the BalanceCheck Screener and BalanceCheck Trainer system as well as other, similar, systems. There may be sections in this guide that do not pertain to the system and protocols that you have purchased.

The BalanceCheck Screener system comes standard with the Workbook system, the BalanceCheck Screener balance testing protocol, balance plate, foam surface, and the training handrail.

The BalanceCheck Trainer system comes standard with Workbook system, the BalanceCheck Trainer training software, balance plate, safety harness with shoulder straps, and the training handrail with the safety structure.

The BalanceCheck Screener and Trainer system comes standard with Workbook system, the BalanceCheck Screener balance testing protocol, the BalanceCheck Trainer training software, balance plate, foam surface, safety harness with shoulder straps, and the training handrail with the safety structure.

All of the BalanceCheck-related systems are designed for easy setup and installation:

- Unpack the components from the boxes.
- Assemble the handrail structure following the directions provided.
- Attach the support structure to the handrail (not available with BalanceCheck Screener and Trainer) following the directions provided.
- Place the circular rear feet of the balance plate in the circular recesses of the crossbar of the handrail/support structure.
- Adjust the balance plate's adjustable foot so that the plate is level.
- Plug the USB cable into the balance plate. Do not plug it into the computer yet.
- Connect the shoulder straps to the top U-support of the support structure.
- Set aside the harness for patient testing. (harness and shoulder straps not available with BalanceCheck Screener and Trainer).
- Place the computer on the PC tray of the handrail structure.
- Insert the BalanceCheck CD-ROM into the computer. The CD-ROM contains both the Bertec Workbook program plus the appropriate BalanceCheck related protocol.
- Follow the on-screen directions and manual directions for software installation (see Installation and System Setup in the Bertec Workbook manual).

## SOFTWARE FEATURES



**Reminder:** This is only a reference guide. For complete software directions, please read the Bertec Workbook manual.

To open the program, double-click on the Workbook icon on your desktop. This will open the program and prompt you to log in. By default, the main login account is **admin** and the password is **password**. If you have configured the program for a different login account, or have added your own, then you will need to use it.

After login, the program will show the Patient List, along with a display of the current selected patient's information and results.

## TO START A NEW PATIENT AND RUN THE BALANCE TESTS

1. In the Patient List, click "New Patient", and then click the box that reads "Click here to start a new patient".
2. Fill in the appropriate patient information. Click Save Changes.
3. Click the Testing tab above the patient silhouette.
4. Click the Tests and Packages drop list and select the test you wish to do, or a predefined Package, such as Balance Sensory Screen.
5. Assist the patient into the safety harness and adjust it properly if performing the Limits of Stability Test.
6. Assist the patient onto the plate, position his/her feet, and attach the shoulder straps if performing the Limits of Stability test.
7. Click the Start/Restart Tests From Top.
8. Read the test description to the patient.
9. Click Start. The test will run automatically.
10. Once the test is complete, click the next test to perform and click Start to run it.
11. Once all tests have been performed, click *End of Tests Report* if it is not already selected, and click the Printer icon button on the top right of the program window. You may select this report at any time and then click on any test to perform it.

The Perturbed Stability (Eyes Open/Closed on Foam) requires the use of the grey foam block. Once you have placed the foam on the plate, allow a minute or more for the plate to self-calibrate before the patient steps back on.

When done, click back to the Patients tab to select a different patient or start a new one.

## TRAINING

Training is designed to correct inadequacies in the patient's balance. It should be part of your prescribed training program.

In the training mode, you have the choice of three different tests with many customizable parameters within each test.

- Static Balance Training - The patient must control his/her center of gravity (CoG) by keeping it within a target area for a specified length of time.
- Dynamic Balance Training - The patient is required to move and control his/her CoG.
- Limits of Stability Training - The patient must move his/her CoG to specific locations on the extremes of his/her stability and then hold that position.

## TO RUN THE TRAINING PROGRAMS

From the Patients tab, select the Patient and then click the Testing tab.

1. In the Testing tab, select a Training from the list of Tests and Packages drop list.
2. Set the Training parameters (see below)
3. Assist your patient in the harness and onto the balance plate if necessary. Make sure that the patient's feet are properly positioned.

Refer to the specific Test or Training protocol manual for a complete explanation of all of the customizable test parameters.

- With Static Training and Weight Shift Training you have the choice of testing your patient on one foot or two and using the bare balance plate or the foam training surface on the balance plate.
- With Explore Base of Support Training you can ask the patient to follow a moving target (Speed) or follow predetermined paths (Accuracy) at their own pace. You also have the choice of using the bare balance plate or the foam training surface.
- For Limits of Stability Training Bertec highly recommends using the harness and shoulder straps. You have many options to choose from including: target sets, target sizes, time, and target locations.

After any of the training programs have been performed, you can view the corresponding report by clicking the *End of Test Report* if it not already selected. Interpreting those reports will be discussed in the next chapter.



## INTERPRETING REPORTS

For detailed instructions and explanations of the results, refer to the specific Test or Training protocol manual.

Reports are available after any of the Tests or Training protocols have been completed.

To view the reports, click the “Reports” tab at the top of the screen. You may select any report that is shown, and use the drop-list to filter by Test or Training. The Timeline at the bottom of the screen can also be used to locate a Test result and report.

Reports can be printed by clicking the Printer icon button on the top right of the screen, and can be emailed to the Patient or a colleague by using the Email icon button.

### STABILITY REPORTS FROM THE BALANCE TESTS

Clicking “Report” for any of these tests will bring up the report for the four balance tests. There are four graphs at the top and a table of statistics at the bottom of the report. The ellipse on each graph represents an area containing 95% of the patient’s center of pressure (CoP) points. The smaller the ellipse, the better. Take note of the scale on the axis as it may change from patient to patient depending on differences in their balance. An oblong ellipse indicates a primary direction of movement; whereas, a rounded ellipse indicates that movement was more equal in each direction. The graph’s vertical axis corresponds to front-to-back motion; the horizontal axis corresponds to side-to-side motion.

The table at the bottom is a numerical breakdown of the ellipses in the graphs. The Stability Score is the prime indicator of the patient’s balance. A value for each parameter is given so that it is easier to identify weaknesses in the patient’s balance. For example, if the patient’s Stability Score was low for the two tests that required closed eyes, then the patient relies too heavily on visual cues to maintain his/her balance. Also, if the patient scored well on the first three tests, but scored poorly on the fourth (PS-EC), then the patient has difficulty with vestibular compensation. This is a problem shared by many people with balance troubles.

The following is a summary for the statistics:

- Anterior-Posterior CoP Excursion - the total amount of front to back movement. The smaller, the better.
- Lateral CoP Excursion - the total amount of side to side movement. The smaller, the better.
- Direction of Max Instability - the direction of primary (the most) movement.
- Max Standard Stability Used - the percentage of stability used in the primary direction. The smaller, the better.
- Min Standard Stability Used - the percentage of stability used in the direction of least movement. The smaller, the better.
- Stability Score - the main/overall score for the patient’s balance during that test. Essentially, this is a measure of the patient’s ability to remain still. The *larger* the percentage, the better.
- Age Matched Average Score - the average stability scores of healthy people of the same height and age group as your patient. These scores are color coded, based on standard deviation, for ease of comparing your patient’s score to his/her peers. *The color is not the final indicator of balance stability.* Use the score in making your diagnosis.

To access the report for the Limits of Stability test, select the Test results from either the Reports tab or the timeline at the bottom of the screen. (Limits of Stability is not available on BalanceCheck Screener and Trainer.)

The Limits of Stability report is broken into two sections: Actual Limits of Stability and LoS vs. Normal Stability - Eyes Open, each with a graph and a table.

- Actual Limits of Stability - shows LoS scores for each direction for easy identification of the patient's balance strengths and weaknesses. The blue ellipse on the graph represents the patient's LoS in relation to the theoretical standard (red ellipse).
- LoS vs. Normal Stability EO - shows the patient's Max Actual Stability Used, Min Actual Stability Used, and the LoS Score in relation to Age Matched scores. The smaller, the better for the first two values. The larger, the better for the LoS score. Once again, the colors are for easy identification only. Use the actual values in your diagnosis, not the colors. The blue ellipse on the graph is the patient's actual Limits of Stability. The green ellipse is the patient's normal stability with eyes open (Note - the ellipse may be difficult to see if the patient had good balance during NS-EO).

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## TRAINING REPORTS FROM THE BALANCE TRAINING

Once any of the training programs have been run, reports are available for the results. There is one report for each of the Training programs performed. The graphic in the top portion of the page depicts the target(s) and the patient's line of motion used to move his/her CoP to the target(s). The table in the bottom portion of each report provides a score, a time, and the parameters used for the training.

- Static Training Score is based on the patient's time for completion. The higher the percentage, the better.
- Dynamic Training Score is based in the distance of the patient's CoP to the target. The higher the percentage, the better.
- Limits of Stability Score is an average of how stable the patient was in each target. The higher the percentage, the better.
- Limits of Stability Average Latency is a measure of the patient's reaction time in moving from one target to the next. The *smaller* the time, the better.

These scores are useful in evaluating the patient's rehabilitation training, but so is a visual evaluation of the patient's movement lines as shown in the graphic.

## BILLING AND CODING

Individuals using our systems have successfully been reimbursed for using balance assessment and training; however, the codes that can be used and the potential for reimbursement is a matter of several factors including, but not limited to: where your facility is located, the type of facility it is, who is performing testing, and the previous diagnosis of the patient. Since there are so many factors in determining CPT billing and coding issues, we are providing you with a list of codes that may work. In addition, we'll provide contact information for your regional Medicare office so you can check with them to see how these codes will work specifically for you. Alternatively, you may check directly with your Medicare carrier, if you have that contact information.

Audiologists often have a difficult time billing for rehabilitation codes as they tend to only have 92548 available for use.

### LIST OF CODES THAT WORK:

97750 Physical Performance Test and Measurement with Written Report (Assessment)

97001 Evaluation (Therapy)

97110 Therapeutic Exercises (Therapy)

97112 Neuromuscular Reeducation (Therapy)

97530 Functional Exercises (Therapy)

### REGIONAL OFFICE MAILING ADDRESSES

#### **Connecticut, Massachusetts, Maine, New Hampshire, Rhode Island, and Vermont.**

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2201 Sixth Avenue, MS-40  
Seattle, WA 98121  
Phone: (206) 615-2306 Fax: (206) 615-2027

Other pertinent information may be found at the Medicare website: [www.cms.hhs.gov](http://www.cms.hhs.gov)

**NOTES**