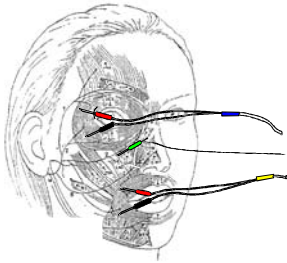


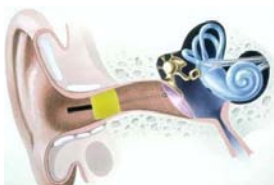
# NEUROMONITORING AT A GLANCE

## I. Acoustic Neuroma Surgery



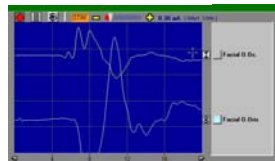
Spontaneous activity  
Free-running EMG  
with acoustic feedback  
for detecting bursts  
and neurotonic  
discharges.

BAEP:  
only wave I and II  
visible due to  
tumour in  
preoperative  
baseline;  
now: amplitude  
reduction in  
comparison  
to baseline  
due to  
drilling

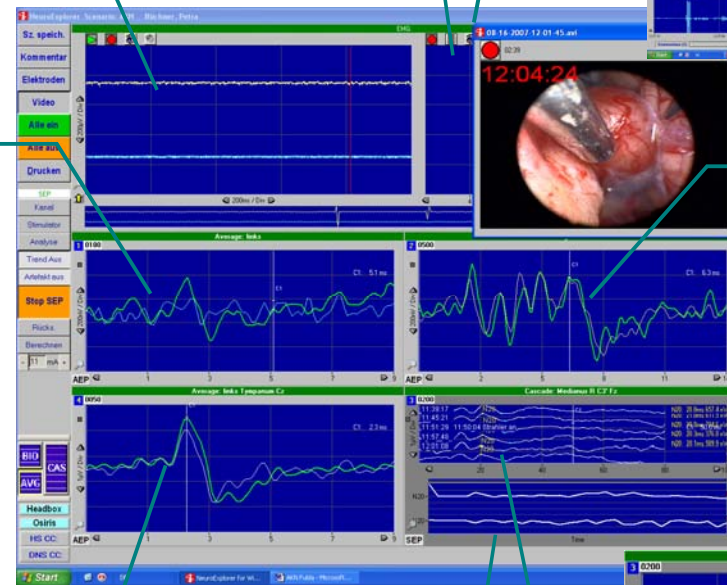
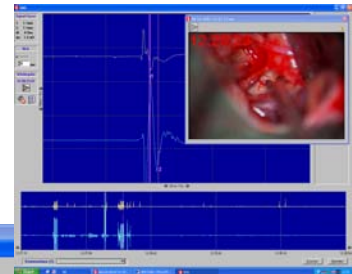


Fast registration  
non-invasive  
electrocochleography  
with Tympanon  
electrode for fast  
registration of large  
potential when  
conventional AEP  
disappears

Direct Nerve Stimulation  
facial nerve detected,  
proper function



Learning from synchronous  
OR-video  
Revise synchronous stored  
EMG and video registration.



BAEP  
contralateral  
sureness that  
technically all is  
ok, no artefacts  
and no side  
effects.

Trend display of amplitude  
and latency  
Automatic peak detection,  
trendcurve, visual and  
auditive alarm for SEP,  
to hold the cranial nerves  
in high regard.

Median SEP  
for early detection of  
damage due to patient  
head fixation.

