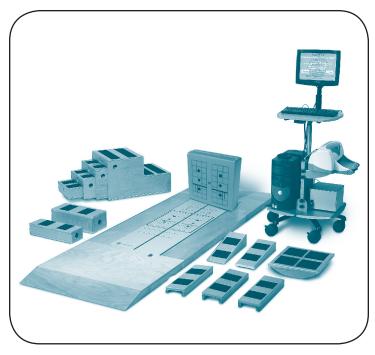


Balance Master®



Physical Dimensions:

	in	cm	
	1111	cm	
Dual force plate	18 x 60 x 2	46 x 152 x 5	
System cart	25 x 24 x 44-57*	64 x 61 x 112-145*	
Apron:			
Side piece	8 x 60 x 2	20 x 152 x 5	
Entry end piece	35 x 32 x 2	89 x 81 x 5	
Exit end piece	35 x 23 x 2	89 x 58 x 5	
Alternate exit end	35 x 8 x 2	89 x 20 x 5	
Assembled dimensions	35 x 95-115** x 2	89 x 231-292** x 5	

 $(W \times D \times H)$

^{**}Minimum-maximum depth depending on exit end piece used.

Maximum patient weight	500 lb	227 kg
Minimum footprint required	120 x 72	305 x 183
Total system weight	200 lb	90 kg

Components:

- NeuroCom® Balance Manager® software
- 60" static dual force plate
- Force plate apron
- IBM compatible computer
- 17" LCD color monitor
- Color printer
- Wireless mouse
- Mobile computer cart
- Medical-grade isolation power supply

Electrical Characteristics:

- 100-240 VAC / 50-60 Hz / 500 W
- ETL listed to UL60601-1
- ETL listed to CAN/CSA No. 601.1





Accessories Included:

- Rocker board
- Step-up blocks: 4 in (10 cm) and 6 in (15 cm)
- Leveling block: 2 in (5 cm)
- Heel/toe wedges: 6° and 12° A/P
- Inversion/eversion wedges: 3° and 6° M/L
- Foam pad: 18 x 18 x 5 in (46 x 46 x 13 cm)
- Four piece step/stair set:

Low step	4 in (10 cm)
Medium step	8 in (20 cm)
High step	12 in (31 cm)
Two-step stair	8 in (20 cm)

Specifications subject to change without notice.

Additional options/configurations are available. Contact NeuroCom for more information.

^{*}Minimum-maximum monitor extension height.



Balance Master®

Standardized Assessment Protocols:

Limits of Stability (LOS) The LOS is an assessment of the voluntary motor system that quantifies impairments in ability to intentionally displace the COG to the patient's stability limits without losing balance. The patient performs the task while viewing a real-time display of their COG position in relation to targets placed at the center of the base of support and at the stability limits. For each of eight directions, the test measures movement reaction time, movement velocity, movement distance, and movement directional control.

modified Clinical Test of Sensory Interaction on Balance (mCTSIB) The mCTSIB is a modification of the original CTSIB that provides information about the patient's ability to maintain postural stability under eyes open firm surface, eyes closed firm surface, eyes open on foam, and eyes closed on foam surface conditions. The mCTSIB enhances an observational test also known as the "Foam and Dome" test by providing an objective measure of patient sway velocity for each of the four task conditions.

Rhythmic Weight Shift (RWS) The RWS quantifies the patient's ability to perform rhythmic movements of their COG from left to right and forward to backward at three distinct paces. During performance of each task, the patient views a real time display of their COG position relative to a target moving at the desired pace and amplitude. For each direction and pace, the RWS measures movement velocity and directional control.

Weight Bearing Squat (WBS) The WBS quantifies the patient's ability to perform squats with the knees flexed at 0°, 30°, 60°, and 90°, while maintaining equal weight on the two legs.

Unilateral Stance (US) The US is a performance test quantifying the patient's ability to maintain postural stability while standing on one leg at a time with the eyes open and closed. The US enhances the observational testing of single leg stance performance by providing an objective measure of patient sway velocity for each of the four task conditions.

Sit-To-Stand (STS) The STS is a performance test quantifying the patient's ability, on command, to quickly rise from a seated to a standing position. The STS quantifies time required to transfer weight from the buttock to the feet (weight transfer time), the strength of the rise (rising index), the symmetry of the rising effort between the left and right legs (weight symmetry), and the COG sway velocity in the standing position.

Walk Across (WA) The WA is a performance test that quantifies the patient's steady state gait while walking across the force plate. The WA enhances observational testing of gait by measuring the average width and length of the patient's steps on the force plate, the symmetry of left and right leg step lengths, and the patient's gait speed across the force plate.

Tandem Walk (TW) The TW is a performance test that quantifies the stability and speed of the patient's gait while placing one foot directly in front of the other. The patient is instructed to walk heel to toe from one end of the force plate to the other as quickly as possible and then stop. The TW measures the average width of the patient's steps on the force plate, the speed of the gait, and the patient's COG sway velocity following termination of the gait.

Step-Quick-Turn (SQT) The SQT is a performance test that quantifies turn performance characteristics. The patient is instructed to take two forward steps on command, and then quickly turn 180° to either the left or right and return to the starting point. The SQT enhances commonly used observational tests for turn stability by measuring separately for each direction of turning, the time required to execute the turn, and the velocity of COG sway during the turn.

Step-Up-and-Over (SUO) The SUO is a performance test that quantifies the patient's ability to control their body weight and postural stability while stepping up and down over a curb. The patient is instructed to step up onto a curb on command with one foot, swing the other foot over the curb while lifting the body through an erect standing position as quickly as possible, and then lower the body weight to land the swing leg as gently as possible. The SUO measures, for each leg, the strength of the rise (lift-up index), the movement time, and the impact of the swing leg landing (impact index).

Forward Lunge (FL) The FL is a performance test that quantifies the patient's ability to control body weight while lunging forward with one leg. The patient is instructed to, on command, lunge/step forward onto one leg, then push backward with that leg to the original standing position. The FL measures separately for each leg, the distance of the lunge as well as the profile of the vertical force exerted by the lunging leg (force impulse) during the landing and push off phases of the maneuver.