

OSCE Checklist - Dix-Hallpike Test & Epley Manoeuvre

INTRODUCTION		
1	Wash hands	
2	Introduce yourself	
3	Confirm patient details	
4	Explain procedure	
5	Gain consent	
6	Check for contraindications	
7	Ensure the patient has someone to take them home after the procedure	
DIX-HALLPIKE TEST		
8	Ask the patient to sit upright on the examination couch	
9	Adjust the patient's position so that when supine, their head will hang over the edge of the bed, allow for head extension below the horizontal plane.	
10	Position yourself standing behind the patient (who should be sitting upright on the bed)	
11	Turn the patient's head 45-degrees to one side	
12	Whilst supporting the neck, move the patient from their sitting position to a supine position (in one brisk smooth motion), ensuring their head hangs over the bed 30-degrees below the horizontal plane.	
13	Ask the patient to keep their eyes open throughout this process	
14	Inspect the patient's eyes carefully for evidence of nystagmus for at least 30 seconds	
15	If no nystagmus is observed, the test is then complete for that side and you should carefully sit the patient up.	
16	After a short break, the test should be repeated on the other side (turning the patient's head in the opposite direction)	
EPLEY MANOEUVRE		
17	The Epley manoeuvre typically follows on from a positive Dix-Hallpike test, so we will assume the patient is still positioned lying flat, with the head hanging over the end of the bed, turned 45° away from the midline.	
18	Turn the patient's head 90° to the contralateral side, approximately 45° past the midline (still maintaining neck extension over the bed). Keep the patient in this position for 30 seconds.	
19	Whilst maintaining the position of the patient's head, ask the patient to roll onto their shoulder (on the side their head is currently turned towards).	
20	Once the patient is on their side, rotate the patient's head so that they are looking directly towards the floor. Maintain this position for 30 seconds to a minute.	
21	Sit the patient up sideways, whilst maintaining head rotation.	

22	Once the patient is sitting upright, the head can be re-aligned to the midline and the neck can be flexed so that the patient is facing downwards (chin to chest). Maintain this position for 30 seconds.	
CLOSING THE CONSULTATION		
23	Thank patient	
24	Summarise findings	
25	Suggest further assessments & investigations	
26	Wash hands	

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