

RECOMMENDED STANDARDS FOR INTRAOPERATIVE MONITORING OF AUDITORY EVOKED POTENTIALS

Surgical procedures within the posterior and middle cranial fossa may be complicated by postoperative deficits caused by damage of the auditory nerve or brainstem. Some of these deficits may be secondary to vascular manipulation or mechanical traction of neuronal structures. Neurophysiologic intraoperative monitoring (NIOM) with auditory evoked potentials represents an objective method of monitoring auditory nerve and brainstem functions during these surgical procedures. Although auditory nerve action potentials have been recorded directly from the exposed nerve, most of the clinically useful intraoperative experience has been obtained with [brainstem auditory evoked potentials](#) (BAEPs).

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