



**2020 NAEC Accreditation Criteria for Level 3 Centers**

Epilepsy Center Criteria	Verification Method/Notes - Center Does NOT Perform Surgery	Verification Method/Notes – Center Does Perform Surgery
<b>EPILEPSY CENTER SERVICES</b>		
<b>1) Electrodiagnostic Services</b>		
a) 24-hour video-EEG with scalp electrodes	Adequate volume of 25+ cases reported on Annual Report (50% of the normal threshold because of COVID-19). Please enter information in the Center Annual Report to explain if your center is not meeting the usual 50 case threshold. Upload 2 EMU reports from patients admitted in in 2020. Pediatric and Adult/Pediatric centers must upload a report for a patient younger than 10 years old.	
b) 24-hour video-EEG recording with intracranial electrodes (subdural, epidural, or depth electrodes)	Not required	Adequate volume of at least 3 cases from 2018 to 2020 if your center performs this service. Upload 3 reports from 2018 through 2020.
c) Access to Wada testing or functional neuroimaging	Not required	
d) Functional cortical mapping by stimulation of intracranial electrodes	Not required	
<b>2) Imaging Services</b>		
a) Magnetic resonance imaging (at least 1.5T)	Upload 1 report reflecting expertise in epilepsy signed/approved by the neuroradiologist listed in Center Annual Report if your center performed this service	
b) Computerized axial tomography	Center Annual Report Response “Yes”	
c) Cerebral angiography	Not required	
d) Access to interictal PET or ictal/interictal SPECT by established arrangement or on site	Not required	
<b>3) Pharmacological Services:</b> Quality-assured anticonvulsant serum drug levels	Center Annual Report Response “Yes”	
<b>4) Neuropsychological/psychosocial services:</b> Comprehensive neuropsychological test batteries	Upload 1 report from 2020 if your center performed this service	
<b>5) Surgical Services</b>		
a) Any resective or ablative epilepsy surgery with goal of controlling seizures	Not required	Upload 1 operative report from 2020 signed by the neurosurgeon listed in Center Annual Report if your center performed this service
b) Placement of intracranial electrodes	Not required	Center Annual Report Response "Yes" if center performs service
c) Implantation and management of the vagus nerve stimulator or other neuromodulatory devices	Not required	Upload 1 report from 2020 if center performed service in 2020
<b>6) Rehabilitation Services (inpatient and outpatient):</b> Sufficient physical, occupational, and speech therapy	Center Annual Report Response “Yes”	

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<b>PERSONNEL (Full or part-time individual accessible to center patients) –</b>		
<b>Note: If your center is missing one of these personnel due to COVID-19 related staff shortages, please enter more information in the Center Annual Report. NAEC will consider exceptions on a case-by-case basis.</b>		
<b>1) Physicians</b>		
a) Medical Director with at least two years of experience post-fellowship		Upload CV
b) Second epileptologist with at least two years of experience post-fellowship		Upload CV
c) Adult/Pediatric and Pediatric centers must have a child neurologist with two years of experience post-fellowship, if their two epileptologists are adult epileptologists		Upload CV
d) At least one neurosurgeon who is ABNS board-certified or board-eligible and tracking toward certification	Not required	Upload CV
<b>2) Neuropsychologist</b>		Upload CV
<b>3) Psychosocial:</b> Access to a social worker		Name and info listed in Center Annual Report
<b>4) Nursing, Nurse Practitioner/Physician Assistant</b>		
a) Outpatient clinic nurse/nurse practitioner/physician assistant with expertise in epilepsy		Name and info listed in Center Annual Report
b) Inpatient EMU nurse/nurse practitioner/physician assistant with expertise in epilepsy		Name and info listed in Center Annual Report
<b>5) EEG Technologist(s):</b> At least one technologist board-certified by ABRET		Name and info listed in Center Annual Report
<b>6) Neuroradiologist</b>		Name and info listed in Center Annual Report
<b>SAFETY AND TREATMENT PROTOCOLS</b>		
1) Examination of speech, memory, level of consciousness, and motor function during and following a seizure		Upload
2) Measures to be taken if number, duration, or severity of seizures is excessive, including number or duration of seizures requiring physician notification*		Upload
3) Medication reduction to increase seizure yield		Upload
4) Care of head dressings and measures to prevent postoperative infections or other complications in patients studied with intracranial electrodes	Not required	Upload if center performs service
5) Management of status epilepticus and seizures in hospitalized patients*		Upload
6) Admission order set for EMU patients		Upload
7) Layout and furnishings should allow easy access to and continuous observation of patients and minimize risk of injury due to falls and other safety concerns		Center Annual Report Response “Yes”
8) EMU Caring - one physician and one nurse or tech must complete		Enter name and emails in Center Annual Report. Upload certificates (if received).
9) Written referral arrangement with Level 4 Center		Upload: Options include written MOU between the two centers or letters/emails with evidence of an established referral pattern
*Adult/Pediatric centers must provide a pediatric-specific protocol in addition to an adult-specific protocol.		
<b>CONTINUAL COMPLIANCE</b>		
Centers are required to maintain continual compliance with accreditation criteria throughout their accreditation period.		Attestation in Center Annual Report and interim notification of NAEC of substantial changes, if necessary



**2021 NAEC Accreditation Criteria for Level 4 Centers**

Epilepsy Center Criteria	Verification Method/Notes
<b>EPILEPSY CENTER SERVICES</b>	
<b>1) Electrodiagnostic Services</b>	
a) 24-hour video-EEG with scalp electrodes	Adequate volume of 50 admissions (50% of the normal threshold because of COVID-19). Please enter information in the Center Annual Report to explain if your center is not meeting the usual 100 case threshold. Upload 5 EMU reports from patients admitted in 2020. Pediatric and Adult/Pediatric centers must upload a report for a patient younger than 10 years old.
b) 24-hour video-EEG recording with intracranial electrodes (subdural, epidural or depth electrodes)	Adequate volume of at least 3 cases from 2018 to 2020. Centers are permitted to not have a 2020 case due to COVID-19 but are asked to explain in the Center Annual Report. Upload 3 reports from 2018 through 2020.
c) Access to Wada testing or functional neuroimaging	Center Annual Report Response "Yes"
d) Functional cortical mapping by stimulation of intracranial electrodes	Center Annual Report Response "Yes"
<b>2) Imaging Services</b>	
a) Magnetic resonance imaging (at least 1.5T)	Upload 1 report reflecting expertise in epilepsy signed/approved by the neuroradiologist listed on Center Annual Report if your center performed service
b) Computerized axial tomography	Center Annual Report Response "Yes"
c) Cerebral angiography	Center Annual Report Response "Yes"
d) Access to interictal PET or ictal/interictal SPECT by established arrangement or on site	Upload 1 report from 2020 if your center performed service
<b>3) Pharmacological Services:</b> Quality-assured anticonvulsant serum drug levels	Center Annual Report Response "Yes"
<b>4) Neuropsychological/psychosocial services:</b> Comprehensive neuropsychological test batteries	Upload 1 report from 2020 if your center performed service
<b>5) Surgical Services</b>	
a) Any resective or ablative epilepsy surgery with goal of controlling seizures	Upload 1 operative report from 2020 signed by the neurosurgeon listed in Center Annual Report if your center performed service
b) Placement of intracranial electrodes	Center Annual Report Response "Yes"
c) Implantation and management of the vagus nerve stimulator or other neuromodulatory devices	Upload 1 operative report from 2020 if your center performed service
<b>6) Rehabilitation Services (inpatient and outpatient):</b> Sufficient physical, occupational, and speech therapy	Center Annual Report Response "Yes"



**2021 NAEC Accreditation Criteria for Level 4 Centers**

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<b>PERSONNEL (Full or part-time individual accessible to center patients)</b>	
Note: If your center is missing one of these personnel due to COVID-19 related staff shortages, please enter more information in the Center Annual Report. NAEC will consider exceptions on a case-by-case basis.	
<b>1) Physicians</b>	
a) Medical Director with at least two years of experience post-fellowship	Upload CV
b) Second epileptologist with at least two years of experience post-fellowship	Upload CV
c) Adult/Pediatric and Pediatric centers must have a child neurologist with two years of experience post-fellowship, if their two epileptologists are adult epileptologists	Upload CV
d) At least one neurosurgeon who is ABNS board-certified or board-eligible tracking toward certification	Upload CV
<b>2) Neuropsychologist</b>	Upload CV
<b>3) Psychosocial:</b> Access to a social worker	Name and info listed in Center Annual Report
<b>4) Nursing/Nurse Practitioner/Physician Assistants</b>	
a) Outpatient clinic nurse/nurse practitioner/physician assistant with expertise in epilepsy	Name and info listed in Center Annual Report
b) Inpatient EMU nurse/nurse practitioner/physician assistant with expertise in epilepsy	Name and info listed in Center Annual Report
<b>5) EEG Technologist(s):</b> At least one technologist board-certified by ABRET	Name and info listed in Center Annual Report
<b>6) Neuroradiologist</b>	Name and info listed in Center Annual Report
<b>SAFETY AND TREATMENT PROTOCOLS</b>	
1) Examination of speech, memory, level of consciousness, and motor function during and following a seizure	Upload
2) Measures to be taken if number, duration, or severity of seizures is excessive, including number or duration of seizures requiring physician notification*	Upload
3) Medication reduction to increase seizure yield	Upload
4) Care of head dressings and measures to prevent postoperative infections or other complications in patients studied with intracranial electrodes	Upload
5) Management of status epilepticus and seizures in hospitalized patients*	Upload
6) Admission order set for EMU patients	Upload
7) Layout and furnishings should allow easy access to and continuous observation of patients and minimize risk of injury due to falls and other safety concerns	Center Annual Report Response "Yes"
<b>8) EMU Caring - one physician and one nurse or tech must complete</b>	Enter name and emails in Center Annual Report. Upload certificates (if received)
*Adult/Pediatric centers must provide a pediatric-specific protocol in addition to an adult-specific protocol.	
<b>CONTINUAL COMPLIANCE</b>	
Centers are required to maintain continual compliance with accreditation criteria throughout their accreditation period.	Attestation in Center Annual Report and interim notification of NAEC of substantial changes, if necessary